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ABSTRACT

This report summarizes data compiled in a survey of student health conducted among 53,362 7th and 12th grade students in the spring of 1993. In order to compare these results to older students' health, 990 students attending Adult Basic Education centers were also surveyed. The survey instrument, which appears in Appendix A, contains 77 questions pertaining to knowledge, attitudes, and behaviors related to drugs, AIDS, and general health. The surveys also served as part of a local needs assessment to assist in reviewing and planning of each district's comprehensive health education curriculum. While the report considers the impact of factors related to drug use, it does not intend to suggest causation. Surveys results, which were compiled and cross-tabulated by grade level, gender, ethnicity, locality, and certain other factors identified as relating to frequency, are presented in four general categories: (1) description of students represented; (2) tobacco, alcohol and other drugs; (3) HIV/AIDS; and (4) general adolescent health perspective. According to the results, students increased their use of cigarettes, alcohol, and marijuana compared to a 1991 survey. Other findings are also discussed. It is hoped that the data summary will facilitate comparisons of local results to statewide data so as to assess relative needs. (RJM)

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Missouri
Student Health Survey
Summary Report
1993

Prepared by
Division of Instruction
Department of Elementary and
Secondary Education
P.O. Box 480
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March 1994

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CONTENTS

INTRODUCTION vi
- Purpose vi
- Method vii

DESCRIPTION OF STUDENTS REPRESENTED 1
- By Grade 1
- By Ethnicity 1
- By Locality 2

TOBACCO, ALCOHOL AND OTHER DRUGS (TAOD) 4
- Student Drug Abuse 4
  - Gateway Drugs
  - Inhalants
  - Other Drugs
- Factors Related to Drug Abuse 11
  - Grades
  - Age First Tried
  - Other Factors
  - Perceptions of Risk and Availability
- Conclusions Regarding Student Drug Abuse 12

HIV/AIDS 19
- Attitudes and Beliefs About HIV/AIDS 20
- Knowledge of HIV Transmission 21
- Conclusions Regarding HIV/AIDS 22

GENERAL ADOLESCENT HEALTH PERSPECTIVE 23
- Personal Importance of Various Health Topics of Students 24
- Knowledge About Behaviors That Cause Illness 25
- Consideration of Suicide 25
- Usefulness of Health Classes 25
- Health Topics Learned 30
- Conclusions Regarding General Health 30

SUMMARY 32

RECOMMENDATIONS 33

APPENDICES

LIST OF FIGURES

FIGURE	DESCRIPTION	PAGE
1	Ethnic Composition	3
2	Percents of Students Representing Locales	3
3A	Cigarette Abuse Rate	5
3B	Alcohol Abuse Rate	6
3C	Alcohol Binging Rate	7
4	Gateway Drug Abuse/First Tried	14
5	Previous Month Drug Abuse/Perception of Risk	15
6	Previous Month Drug Abuse/Perception of Availability	16
7	Value of Drug Education	17
8	Knowledge About Behaviors That Cause Illness	26
9	Consideration of Suicide	27
10	Consideration of Suicide/Alcohol Use	28
11	Usefulness of Health Classes	29
12	Health Topics Learned	31

LIST OF TABLES

TABLE	DESCRIPTION	PAGE
1	Students by Grade	1
2	Locales of School Districts	2
3	Number of Students by Locale	2
4	Abuse of Gateway Drugs	8
5	Abuse of Inhalants	9
6	Abuse of Other Drugs	10
7	Gateway Drug Abuse Rates/Semester Grades	11
8	Gateway Drug Abuse Rates/Six Risk Factors	12
9	Trends in Drug Abuse Rates	18
10	Attitudes and Beliefs About HIV/AIDS	20
11	Knowledge of HIV Transmission	21
12	Common Misconceptions About HIV/AIDS	22
13	General Adolescent Health Perspective	23
14	Importance of Health Topics	24

What is the purpose of the summary?

This report is a summary of the data pertaining to student health that school districts in Missouri gathered by surveying samples of their 7th and 12th grade students in the spring of 1993. In order to compare data to that from an older group of students, 990 students attending Adult Basic Education (ABE) centers were also surveyed. While the survey window extended from March 15 through October 31, this report is a summary of data from surveys administered in the spring only (during the 1992-93 school year).

School districts selected their own sampling design, but it was suggested that the following sample table be used.

Total Number of Students in Grade	Percent To Be Surveyed
1-50	100
51-100	40
101-up	30

The survey (see Appendix A) contains 77 questions pertaining to knowledge, attitudes and behaviors related to drugs, AIDS, and general health. Completion of survey items numbered 1-48 was required by the students sampled and was a prerequisite to districts' elibility for Drug-Free Schools and Communities entitlement funds. This part of the survey was developed by the Missouri Department of Elementary and Secondary Education with assistance from the Missouri Department of Health and the Missouri Department of Mental Health. It combines items from the National Institute on Drug Abuse/University of Michigan's "Monitoring the Future" studies with questions from other state and federal sources. Completion of the other parts of the survey was voluntary by the school district. Every participating school district received a district summary report indicating the number and percent of students responding to each response option of each item.

The survey conducted by each district was part of a local needs assessment to assist in review and future planning of the district's comprehensive health education curriculum. The previous survey was conducted in the fall of 1991. A biennial review of the district's drug education program is required under Public Law 101-226, an

amendment to the Drug-Free Schools and Communities Act. This law is binding on every school district, whether the district applies for its Drug-Free Schools and Communities entitlement or not.

This summary of data is to facilitate comparison of local results to statewide data in order to better determine relative needs. The survey did not include adolescents who were not enrolled in school. While the impact of factors related to drug use is considered, the report does not intend to suggest causation. In presenting aggregated statewide data, general references are made to comparative national data.

How was the summary compiled?

Not all data aggregated from the survey results of the individual school districts were utilized in the summary. For those survey items requiring students to describe drug use in their whole life, during the last 12 months, and during the last 30 days, for example, frequency during the last 30 days only was tabulated.

This report is not a summary resulting from a stratified random sample of the school districts of the state, but a summary of the results of samples selected by individual districts. The purpose of this report is secondary to the primary purpose of each individual district's gathering local data for its own needs assessment. No statistical significance (nor absence of it) has been established for the descriptive data presented. Most figures representing percents have been rounded to two places.

A majority of students (78%) responded to all three parts of the survey. Percents presented were determined on the basis of the number of students who responded to each particular item. The entire set of surveys used in this summary was compiled and cross-tabulated by grade level, gender, ethnicity, locality, and certain other factors identified as relating to frequency.

DESCRIPTION OF STUDENTS REPRESENTED

BY GRADE

The data in this summary report represent 41% of the state's public and nonpublic school population of students in the 7th and 12th grades. This representation is 7% higher than in the previous student drug use summary of fall, 1991. There were 38,728 students represented in that report.

Table 1
STUDENTS BY GRADE

	In School	In Surveys Summarized	% Represented In Summary
Grade 7			
Public	67,107	31,652	47
Nonpublic	7,913	1,397	18
Grade 12			
Public	50,533	19,378	38
Nonpublic	5,255	935	18
Total	130,808	53,362	41

In 1993 districts were asked to survey categories of students receiving special services in the same proportion that the general public student body at the 7th and 12th grade levels was surveyed. Approximately 5,000 mentally retarded, behavior disordered, learning disabled, speech impaired, and other students with disabilities were included in the survey. Approximately 3,000 gifted students participated.

BY ETHNICITY

Elementary and secondary school students in Missouri are predominantly white and include only a small percent of each minority group. The students were asked in the survey to place themselves into one of six ethnic categories. Those responding to the "Other" category are assumed to be of mixed race. Black students are under-represented in the survey (8%); public student data for the state show that over 13% of the 7th and 12th grade students enrolled in the fall of 1992 were Black. The White students are, consequently, overrepresented (see Figure 1).

BY LOCALITY

The grouping of the participating Missouri school districts by locality was made with asssistance from the National Center for Education Statistics.

Table 2
LOCALES OF SCHOOL DISTRICTS

	Description
1	urban areas and selected districts in close proximity to urban areas with socioeconomic characteristics similar to urban areas
2	suburban areas within commuting distance to large metropolitan areas, where many of the people are employed, and cities or towns with populations over 15,000
3	rural areas and towns with populations under 15,000

Because of the relatively large number of rural districts who surveyed all students in 7th and 12th grades, a slightly disproportionate number of students in the summary represents rural areas (see Figure 2). Appendix B contains listings of the public school districts placed under locales 1 and 2. There were no nonpublic high schools sampled in locale 3 (rural).

Table 3
NUMBER OF STUDENTS IN SURVEYS SUMMARIZED BY LOCALE

	Locale 1	Locale 2	Locale 3	Total
Grade 7				
Public	3,550	11,935	16,167	31,652
Nonpublic	537	745	115	1,397
Grade 12				
Public	2,264	7,181	9,933	19,378
Nonpublic	675	260	no data	935
ABE Centers	346	410	234	990
Total	7,372	20,531	26,449	54,352

Figure 1. ETHNIC COMPOSITION OF PUBLIC STUDENTS IN SURVEYS SUMMARIZED

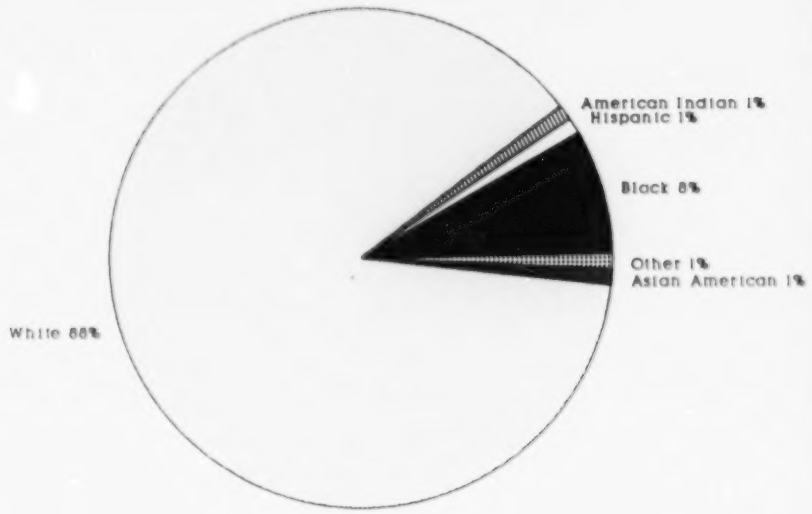
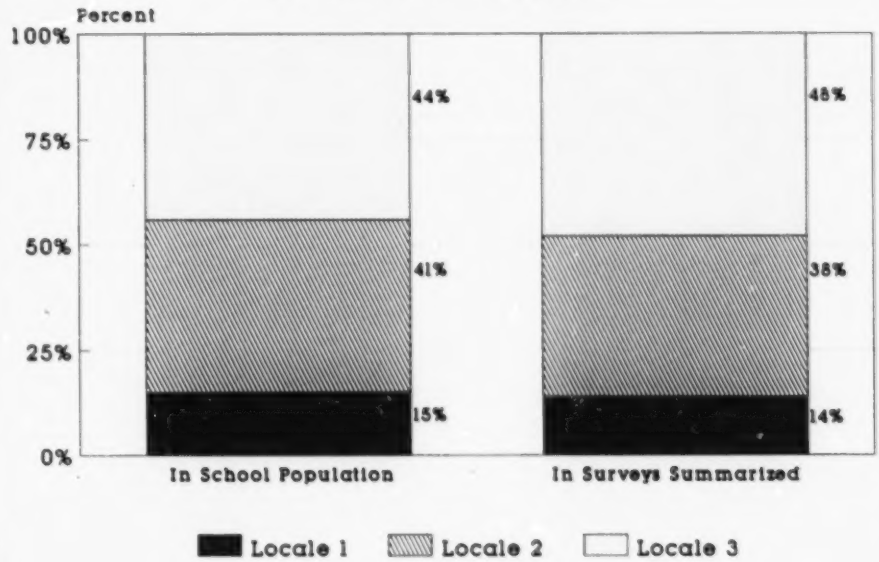


Figure 2. PERCENTS OF STUDENTS REPRESENTING LOCALES



TOBACCO, ALCOHOL AND OTHER DRUGS (TAOD)

STUDENT DRUG ABUSE

While alcohol and tobacco are commonly referred to as "legal drugs," the illegal use or possession by students is both wrong and harmful. ANY amount of use of any kind of drug by 7th or 12th grade students is viewed as abuse and is referrred to as such in this summary report.

Abuse rates are reported for both public (P) and nonpublic (NP) students. In some instances comparisons of 12th grade abuse are made to abuse by ABE students. In other instances comparisons are made to the survey of 7th and 12th grade student drug abuse taken by public schools in the fall of 1991. Studies of drug use surveying by self-report suggest that the collective estimates obtained are usually conservative--that actual drug abuse is probably higher than that reported.

GATEWAY DRUGS

Alcohol, tobacco, and marijuana are commonly referred to as "gateway drugs," because their use typically precedes use of other drugs. Binging is the predominantly preferred method of alcohol abuse by adolescents. "Binging" is the drinking of five or more alcoholic drinks in a row. Unfortunately, this method of abuse places the adolescent at the highest risk of addiction. When coupled with physical immaturity, the risk involved in this behavior is exceedingly high. Figures 3A and 3B show cigarette and alcohol abuse rates by grade for the month previous to the survey. Figure 3C shows binging abuse rates by grade for the previous two weeks.

While the moderate to high abuse of cigarettes and smokeless tobacco has not decreased since 1991, abuse of smokeless tobacco among nonpublic 12th grade students is less than among public 12th grade students. Both binging and marijuana abuse by 12th grade students was reported by more students in 1993 than in 1991, and binging was reported by more nonpublic 12th grade students than by public students at this grade level. Fifty-six percent of the nonpublic male students reported binge drinking at least once in the two weeks preceding the survey. While reported cigarette abuse was higher among ABE students than among 12th grade students, reported binging by ABE students was lower than that reported by 12th grade students.

Figure 3A. CIGARETTE ABUSE RATES
PREVIOUS MONTH - BY GRADE

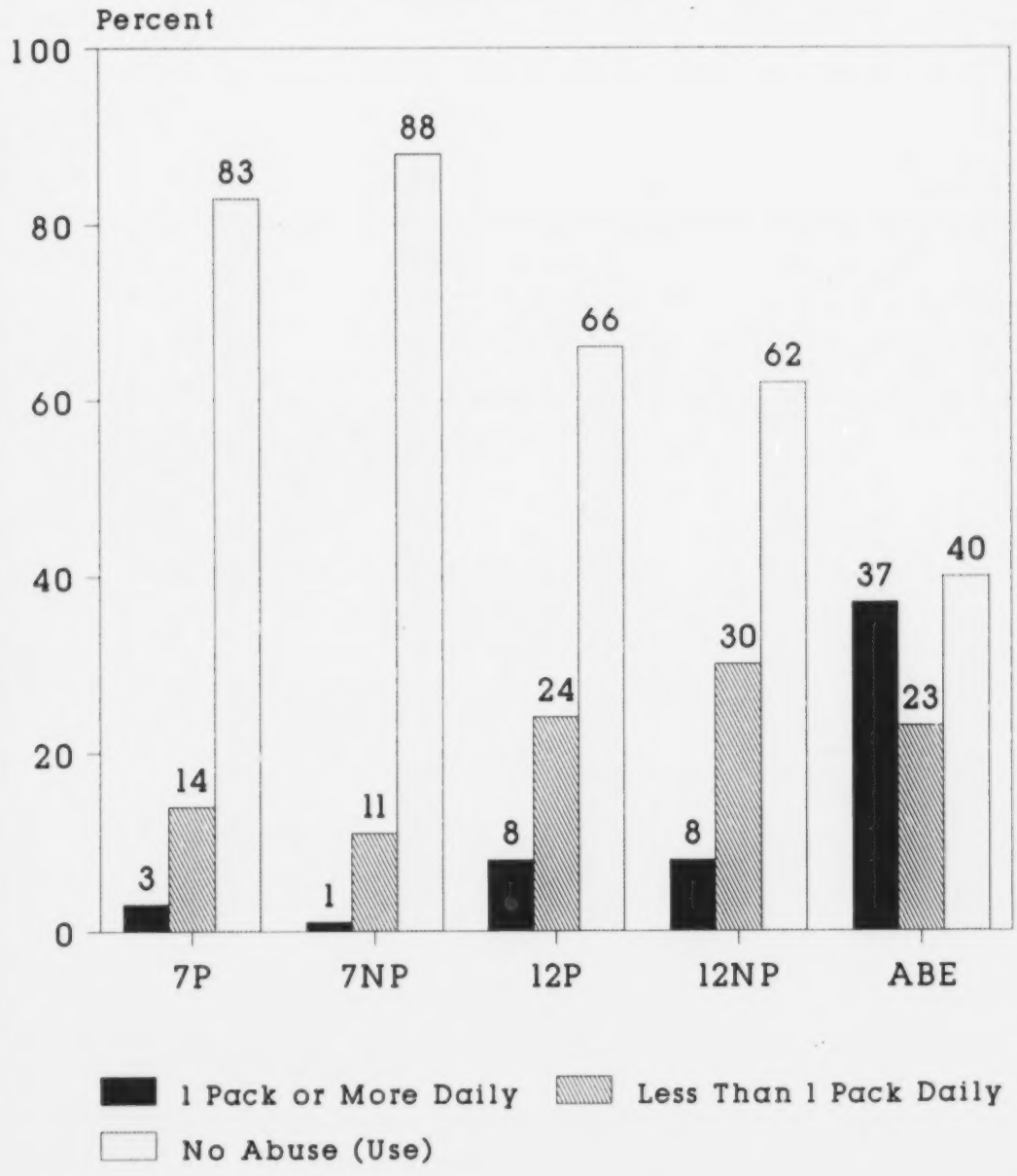


Figure 3B. ALCOHOL ABUSE RATES - HAD ALCOHOL PREVIOUS MONTH - BY GRADE

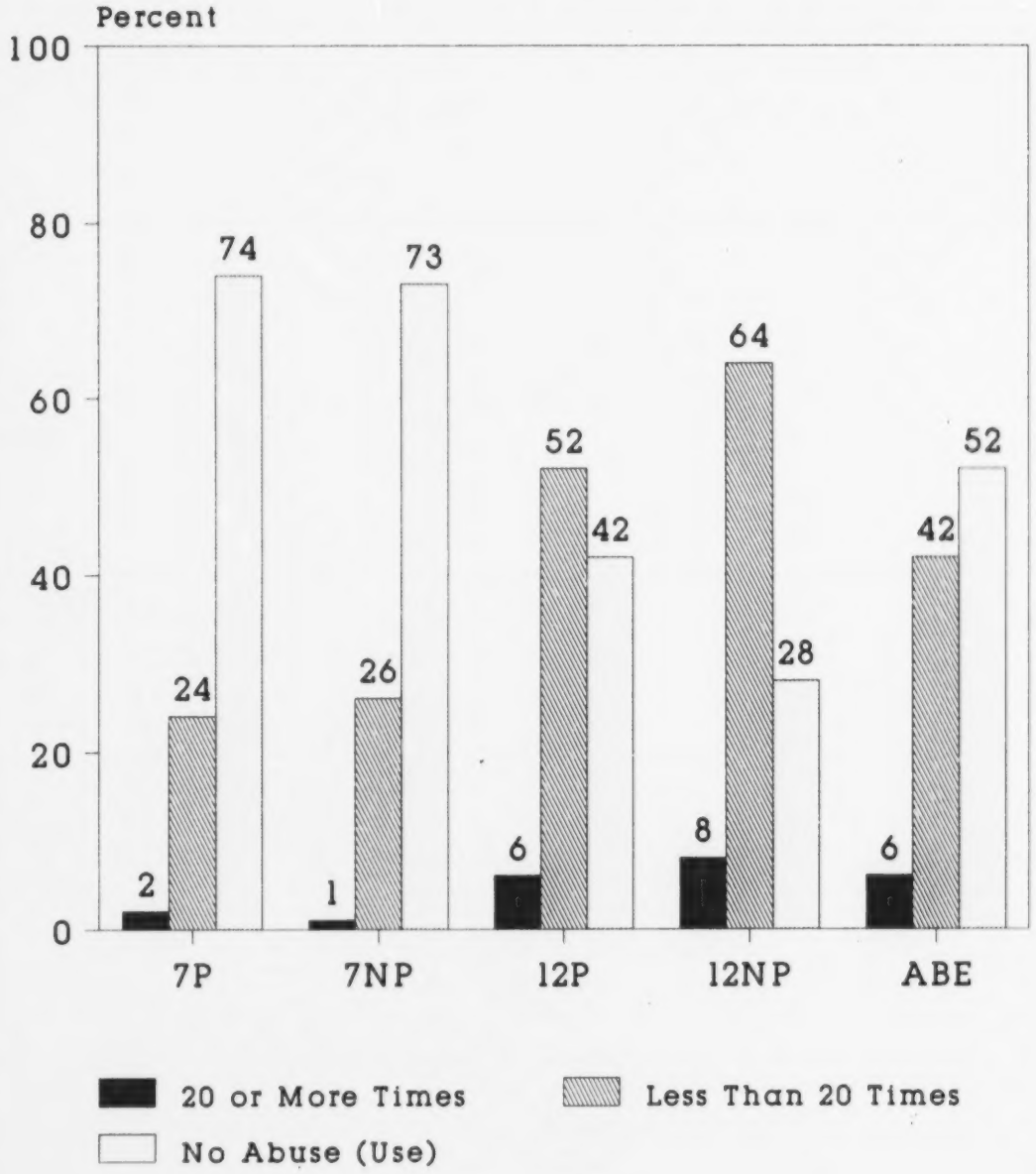


Figure 3C. ALCOHOL ABUSE RATES - BINGING PREVIOUS 2 WEEKS - BY GRADE

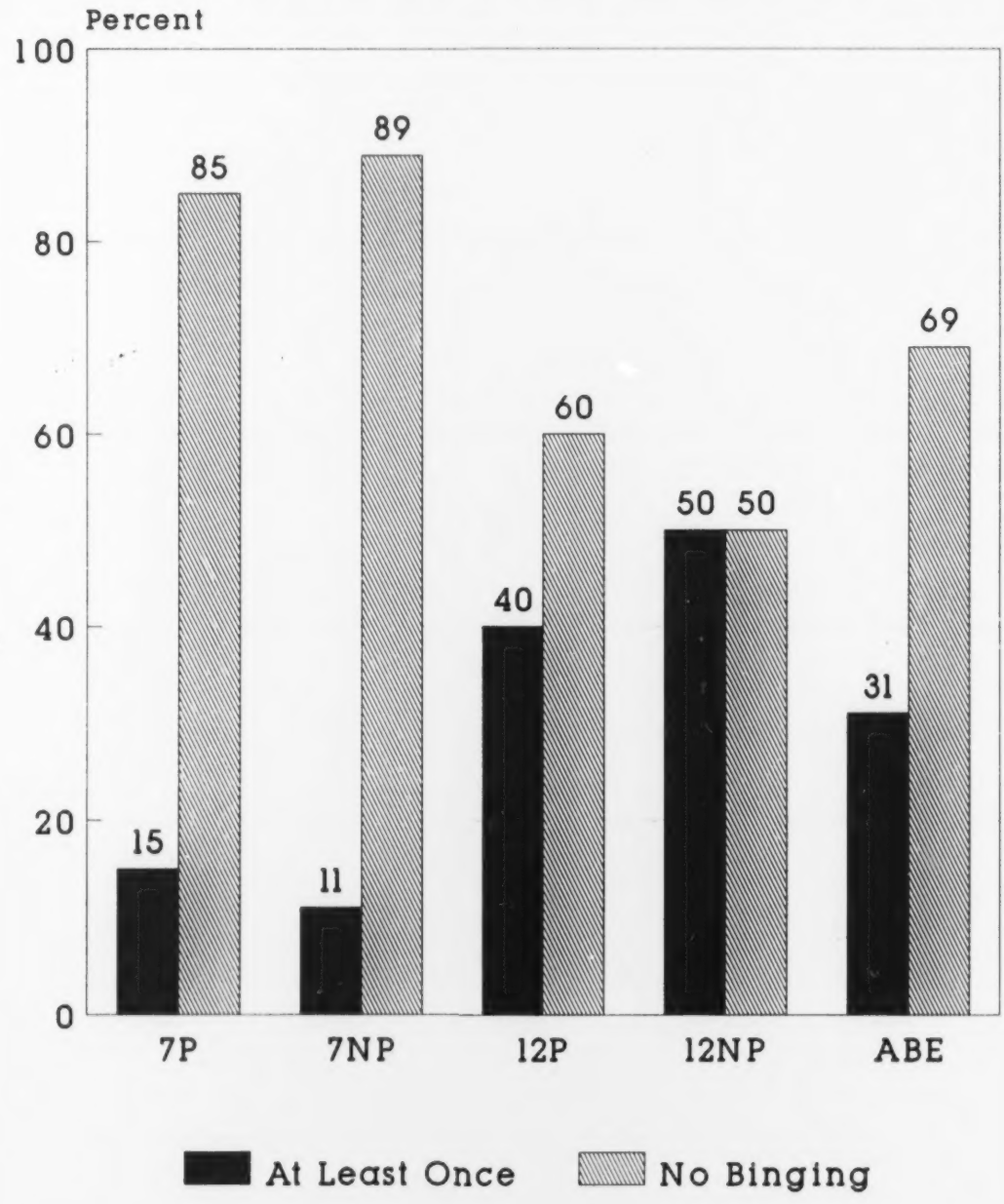


Table 4
TRENDS IN MODERATE TO HIGH ABUSE OF GATEWAY DRUGS
RATES BY GENDER, ETHNICITY, AND LOCALE
12TH GRADE ONLY

		Gender		Ethnicity						Locale		
		M	F	W	B	H	AI	A	O	1	2	3
Cigarettes[1]												
1991	Public Only	9	6	7	3	5	13	9	10			
1993	Public	10	6	9	3	9	17	8	11	8	8	8
	Nonpublic	10	7							8	11	--
Smokeless Tobacco[2]												
1991	Public Only	14	0	7	4	7	19	5	7			
1993	Public	13	1	7	2	7	12	5	11	3	4	9
	Nonpublic	5	-1							2	4	--
Alcohol Binging[3]												
1991	Public Only	44	30	38	22	33	43	29	38			
1993	Public	48	33	41	26	44	49	35	44	33	42	41
	Nonpublic	56	44							50	51	--
Marijuana[4]												
1991	Public Only	4	1	3	4	4	11	3	8			
1993	Public	7	3	5	6	11	9	5	15	7	7	4
	Nonpublic	10	4							8	5	--

[1]1 pack or more daily in previous month
[2]1 or more times daily in previous month
[3]5 or more drinks in a row at least once in previous 2 weeks
[4]10 or more times in previous month

On the survey students were asked to report why they do or do not use gateway drugs. Students most often reported that experimentation was the reason for using marijuana. Parental disapproval and worry about psychological or physical damage as well as becoming addicted were most often cited as reasons for not using this drug. Worry about physical damage or addiction and parental disapproval were most frequently cited as reasons for not smoking cigarettes. "To have a good time with my friends" was the reason most often selected by 12th grade students for drinking, while 7th grade students most often marked "To experiment." Both groups indicated that parental disapproval was a reason for not drinking, but 12th grade students additionally marked "Worried about possible loss of control of myself."

INHALANTS

Possibly because inhalants are cheap and readily available as well as the fact that the danger of instant death or brain damage is not completely understood by students, their abuse is unacceptably high. Abuse among 7th grade students is higher than among those in grade 12, and abuse has not declined since 1991.

Table 5
ABUSE OF INHALANTS
PREVIOUS MONTH RATES BY GRADE

	0 times	less than 10 times	10 times or more
Grade 7 - Public			
1991	93	5	2
1993	93	6	1
Grade 7 - Nonpublic			
1993	93	6	1
Grade 12 - Public			
1991	96	3	1
1993	96	3	1
Grade 12 - Nonpublic			
1993	95	4	1
ABE			
1993	98	2	0

OTHER DRUGS

Overall abuse of drugs other than gateway drugs and inhalants appears similar to that observed in 1991. Abuse reported by nonpublic students is similar to that reported by public students. Abuse by female students is consistently lower than abuse by male students, but few variations in abuse across locales can be seen. Reported abuse by ABE students is higher than that reported by 12th grade students for almost every type of drug (see Table 6).

Table 6
ABUSE* OF OTHER DRUGS
PREVIOUS MONTH RATES BY GENDER AND LOCALE
12TH GRADE AND ABE ONLY

		Gender		Locale		
		M	F	1	2	3
LSD	NP	5	1	3	3	--
	P	3	1	3	3	2
	ABE	4	1	2	2	2
Cocaine	NP	4	1	2	3	--
	P	2	1	2	2	2
	ABE	6	2	4	4	2
Amphatemines	NP	6	2	4	5	--
	P	6	5	5	5	6
	ABE	11	4	6	8	7
Quaaludes	NP	2	0	1	2	--
	P	2	1	1	1	1
	ABE	3	1	2	2	2
Barbiturates	NP	2	1	1	2	--
	P	3	1	2	2	2
	ABE	6	2	4	5	3
Tranquilizers	NP	2	1	1	2	--
	P	3	2	3	2	3
	ABE	7	3	4	6	5
Heroin	NP	2	0	0	2	--
	P	2	0	1	1	1
	ABE	4	1	3	3	3
Other Drugs**	NP	2	1	1	2	--
	P	2	1	1	1	1
	ABE	3	1	2	2	3
Stay-Awake Pills	NP	11	11	11	12	--
	P	13	11	10	12	12
	ABE	13	8	7	12	11
Steriods	NP	2	0	1	2	--
	P	2	0	1	1	1
	ABE	3	0	2	2	2
PCP	NP	2	0	1	2	--
	P	2	0	1	1	1
	ABE	3	1	3	2	1

** any use in previous month* ***narcotics other than heroin*

FACTORS RELATED TO DRUG ABUSE

Eight factors commonly found to be positively related to adolescent drug abuse were identified and cross-tabulated. These factors, along with the numbers of 12th grade students who self-reported each, include:

- low grades in school (656)
- young age of first trial
  (cigarettes=9,776 alcohol=10,420 marijuana=2,324)
- skipping school (1,649)
- no participation in school activities (5,079)
- no definite rules imposed by parents (1,351)
- dislike of school (2,039)
- at least one parent who did not complete high school (3,264)
- not living with both natural parents (2,280)

Table 7
PREVIOUS MONTH GATEWAY DRUG ABUSE* RATES ACCORDING TO PREVIOUS SEMESTER GRADES

	Mostly A's or B's		Mostly C's		Mostly D's or F's	
	Gr. 7	Gr. 12	Gr. 7	Gr. 12	Gr. 7	Gr. 12
Cigarettes	11	30	24	45	40	57
Alcohol	21	57	31	66	45	73
Marijuana	2	12	5	21	17	39

** any use in previous month*

Of these eight factors skipping school, dislike of school, and low grades appear to be the most salient factors related to cigarette and alcohol abuse at both grade levels. Table 8 shows that skipping school and no definite rules imposed by parents appear to be powerful factors related to marijuana abuse, with no participation in school activities and low grades also showing salience for marijuana abuse by students in grade 12.

Another risk factor is age of first use. Figure 4 suggests that generally gateway drug abuse rates are highest for those who first tried the drug before they were 15 years of age.

Table 8
PREVIOUS MONTH GATEWAY DRUG ABUSE* RATES FOR SIX RISK FACTORS
(COMPARED TO COMPOSITE RATES)

	Grade 7							Grade 12						
	(public) composite	skip school[1]	no activities[2]	no rules[3]	do not like school[4]	did not graduate[5]	do not live with both[6]	**(public) composite**	skip school[1]	no activities[2]	no rules[3]	do not like school[4]	did not graduate[5]	do not live with both[6]
Cigarettes	**17**	58	23	38	41	27	28	**34**	54	45	37	55	38	42
Smokeless Tobacco	**9**	39	13	26	24	15	18	**16**	29	18	19	26	18	21
Alcohol	**26**	69	30	47	50	34	36	**58**	81	65	59	75	59	63
Marijuana	**5**	40	8	24	16	9	13	**15**	37	25	25	31	16	24

**any use in previous month*

***[1]skipped school at least 4 days during previous month

[2]do not participate in school activities

[3]parents have not imposed definite rules

[4]do not like school at all

[5]at least one parent did not complete high school

[6]do not live with both natural parents

Student perception of risk involved in the use of specific drugs (see Figure 5) and student perception of the availability of specific drugs also appear to be factors related to abuse levels. At the 7th grade level approximately 75% of the students referred to cigarettes and alcohol as "very easy" or "fairly easy" to get. As many as 35% of these students viewed marijuana in this way, and 14% of these students indicated that LSD was also either "very easy" or "fairly easy" to acquire (see Figure 6). Figure 7 shows that in 1991, 80% of the 12th grade students indicated that the drug education they received in school was of value to them. In 1993, only 74% of the students at this level indicated that drug education was of value.

CONCLUSIONS REGARDING STUDENT DRUG ABUSE

Increases in student abuse of gateway drugs from 1991 to 1993 can be observed across almost all ethnic groups (see Table 9). While American Indians show a decline in abuse of all drugs except cigarettes, Asian Americans and students identifying themselves as "Other" show an almost universal increase in drug abuse across all drug types. Blacks indicate the lowest levels of abuse of cigarettes and alcohol, with American Indians still

indicating the highest. American Indians also still show the highest level of amphetamine abuse. Whites indicate the lowest levels of abuse of drugs other than gateway drugs, with students designating themselves as "Other" indicating the highest abuse levels for these drugs.

As in 1991, few differences are noted among locales, except that smokeless tobacco abuse is much more likely to occur in rural areas and binge drinking is less likely to occur in urban than in suburban or rural areas. Female abuse is below that of males across all drugs. It should also be noted that 12th grade gifted students were found to report higher abuse rates than their peers for all drugs except alcohol and nicotine. At the 12th grade level, nonpublic students abuse alcohol and marijuana more than public students do.

The increase seen in marijuana abuse and binge drinking by students in 12th grade is of particular concern. Inhalant use by students in 7th grade and cigarette use in both 7th and 12th grades are also concerns.

The 1992 national "Monitoring the Future" survey showed abuse patterns for seniors similar to those seen in Missouri's 1993 survey. The following comparisons can be made.

1. Both surveys showed that inhalant abuse decreases as the students get older, with middle school students showing higher rates than seniors. The national survey showed 2.3% of the seniors reporting previous month use; Missouri's summary showed 4%.

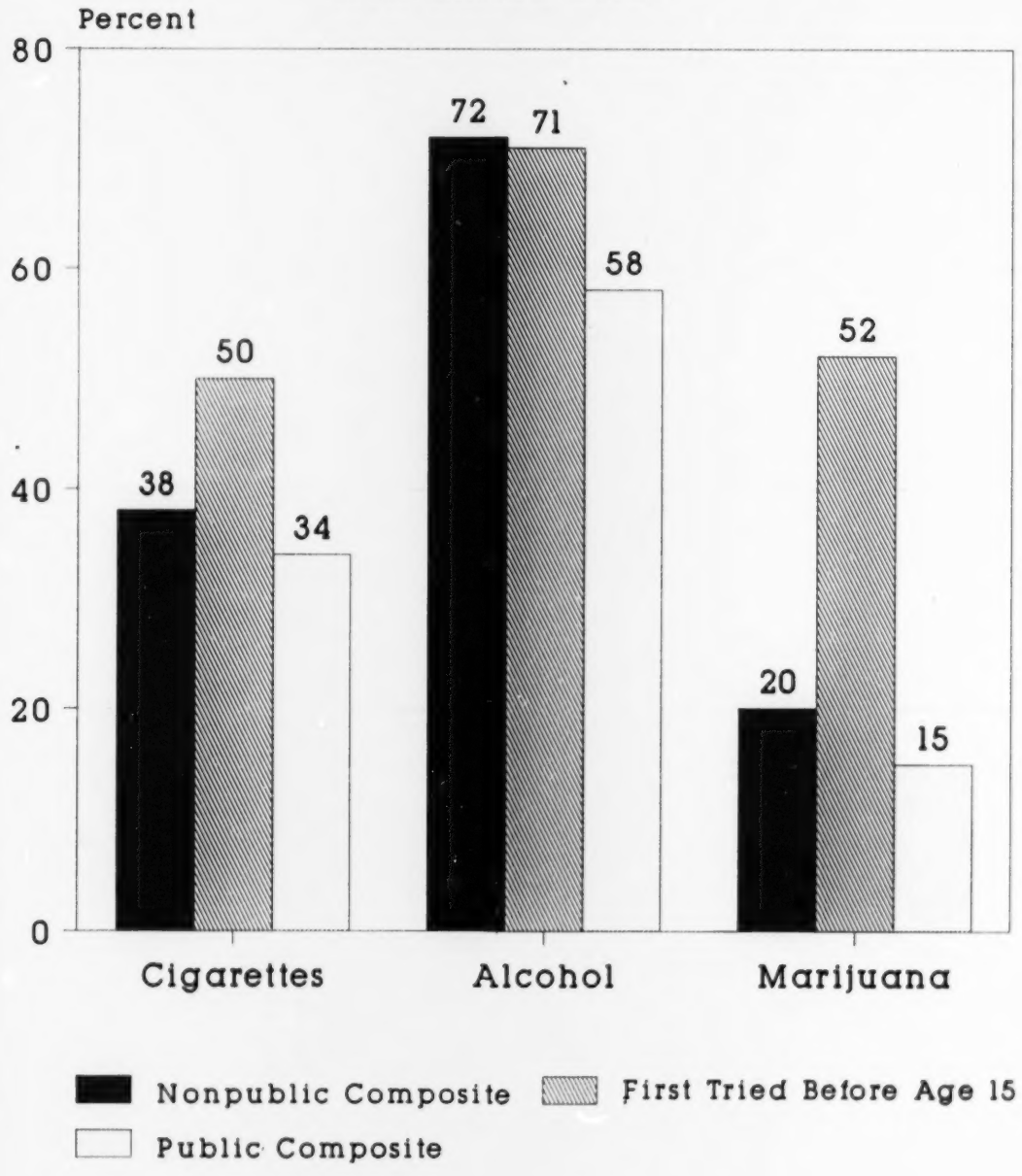
2. The national survey showed a previous month LSD abuse rate of 2%; Missouri's rate was 3%. As in the national survey, Missouri seniors reported increased availability of LSD.

3. The national report showed a decrease in senior alcohol use, with approximately 30% reporting binge drinking within the previous two weeks. Missouri showed 50% for nonpublic seniors and 40% for public seniors, an increase over 1991.

4. Cigarettte smoking was described as falling between 28% and 30% by the national survey; Missouri showed approximately 34%.

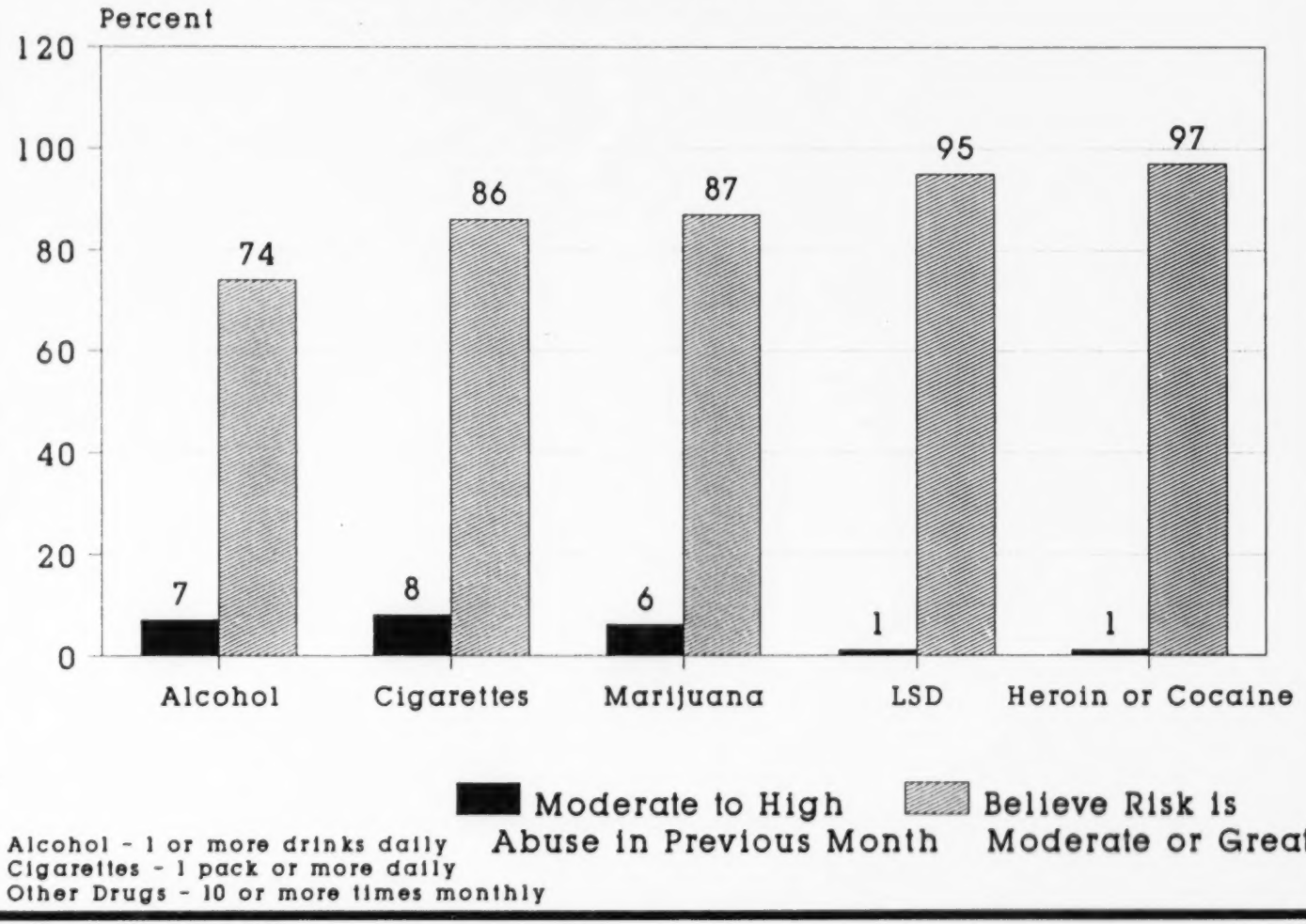
Results of the 1992 national "Monitoring the Future" survey led the principal investigators to suggest that the results may represent a reversal of previously improving drug abuse rates among teenagers. If the 1993 results of this national survey are similar to Missouri's, it is likely that this suggestion will become a conclusion.

Figure 4. GATEWAY DRUG ABUSE* RATES
FOR THOSE WHO FIRST TRIED BEFORE AGE 15
12TH GRADE ONLY



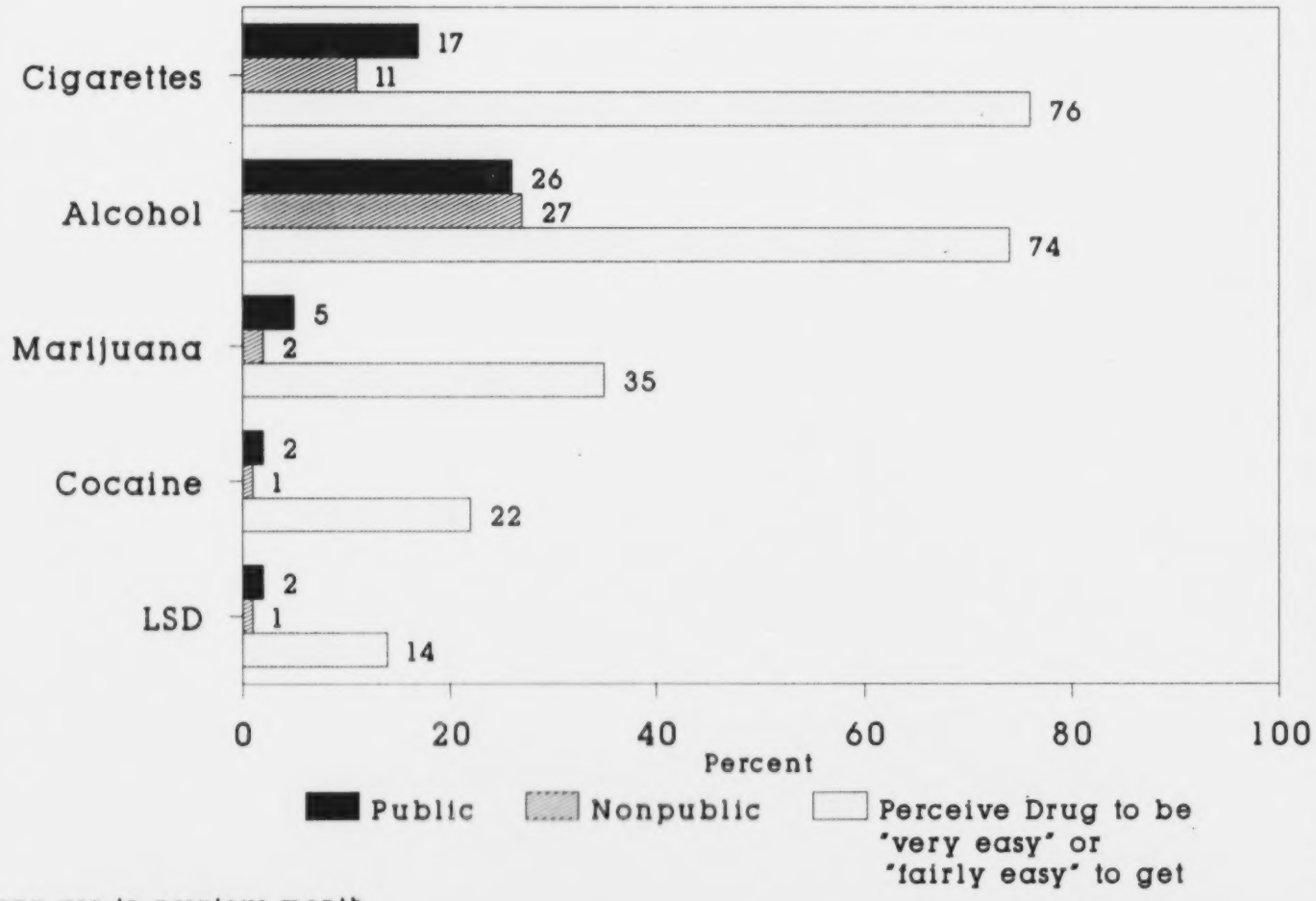
* any use in previous month

Figure 5. PREVIOUS MONTH MODERATE TO HIGH ABUSE* RATES COMPARED TO PERCEPTION OF RISK FOR SOME DRUGS 12TH GRADE ONLY



* Alcohol - 1 or more drinks daily
Cigarettes - 1 pack or more daily
Other Drugs - 10 or more times monthly

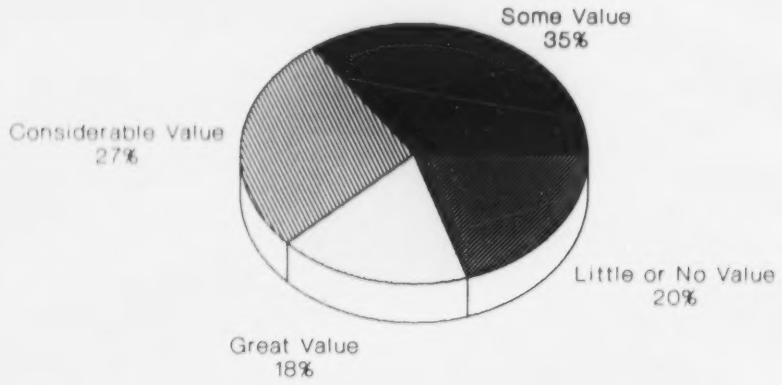
Figure 6. PREVIOUS MONTH ABUSE* RATES
COMPARED TO PERCEPTION OF AVAILABILITY FOR SOME DRUGS
7TH GRADE ONLY



* any use in previous month

Figure 7. VALUE OF DRUG EDUCATION TO STUDENTS PUBLIC - 12TH GRADE ONLY

1991



1993

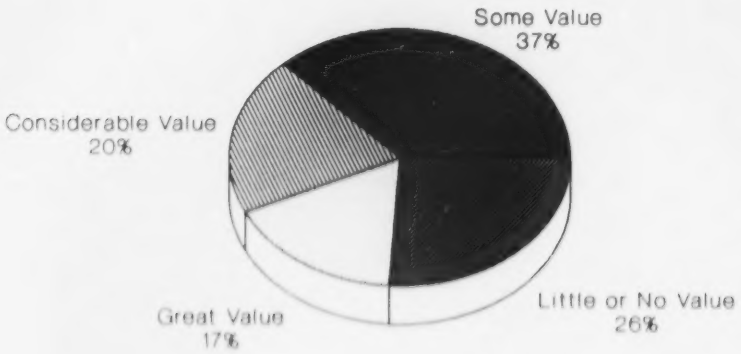


Table 9
TRENDS IN PREVIOUS MONTH DRUG ABUSE* RATES
PUBLIC 12TH GRADE ONLY (1991 AND 1993)
BY ETHNIC GROUP

	cigs	alc	mj	smt	amph	inh	narc	coc	tran	(LSD) hal	barb	her	ster
White													
1991	31	57	10	17	5	4	2	1	2	2	2	1	1
1993	35	60	14	16	5	3	1	1	2	2	2	1	1
Black													
1991	11	42	8	7	4	4	2	3	2	2	3	3	3
1993	14	43	18	5	3	4	2	2	2	2	3	2	3
Hispanic													
1991	35	50	17	18	8	7	9	6	9	7	8	5	5
1993	41	58	25	16	9	10	5	6	7	7	7	4	6
American Indian													
1991	37	67	20	30	15	14	9	8	8	10	10	6	7
1993	45	64	20	26	13	10	6	4	7	9	7	4	4
Asian American													
1991	22	42	8	11	5	7	3	2	4	3	4	3	4
1993	30	49	12	12	7	8	4	5	5	4	7	5	6
Other													
1991	33	53	20	18	10	14	10	10	7	9	9	8	9
1993	36	56	26	26	12	17	9	9	7	11	8	10	10

**any use in previous month*

cigs = cigarettes
alc = alcohol
mj = marijuana
smt = smokeless tobacco
amph = amphetamines
inh = inhalants
narc = narcotics (other than heroin)
coc = cocaine
tran = tranquilizers
hal = hallucinogens
barb = barbiturates
her = heroin
ster = steroids

HIV/AIDS

HIV infection and AIDS (Acquired Immunodeficiency Syndrome) is now the leading cause of death for men aged 25-44 and the fourth leading cause of death for women in the same age group. Since HIV-related disease typically progresses slowly over a period of many years, actual infection commonly occurs during late adolescence and early adulthood.

The AIDS epidemic has to date claimed over 185,000 Americans, including more than 2,200 Missourians. Over one million people in the United States are HIV positive. The state of Missouri currently ranks 12th among states in AIDS cases per 100,000 population, with a case rate of 32.3. The geographic incidence of these cases indicates that there is no area of the state that has not been affected.

To prevent the spread of HIV infection, the U.S. Centers for Disease Control and Prevention (CDC) provides grants to state education agencies to develop programs for HIV/AIDS prevention education for school-age children and youth. Since 1988, the Missouri Department of Elementary and Secondary Education (DESE) has received a grant to provide training, program development, and programming in schools and agencies serving out-of-school youth. This survey is part of a continuing effort to assess and evaluate HIV/AIDS prevention education efforts in Missouri.

The instrument used in this summary surveyed 7th and 12th grade students, who responded regarding knowledge about HIV/AIDS (incorporating common misconceptions) as well as attitudes and beliefs about HIV/AIDS.

ATTITUDES AND BELIEFS ABOUT HIV/AIDS

Students who participated in the survey exhibited generally positive attitudes related to HIV/AIDS. Some highlights included:

- comparison of 1991 and 1993 survey responses indicated that all questions were more positive or stayed the same;
- comparison of 7th and 12th grade responses showed improvement on six of the seven questions, while the seventh stayed the same;
- no major variances from the composite were observed for subcategories including gender, ethnic group, area of residence, and type of school (public/nonpublic); and
- the percentage of positive responses among special services subcategories was somewhat lower than the composite.

Table 10
PERCENT OF STUDENTS RESPONDING POSITIVELY BY GRADE AND YEAR

		7th	12th
I believe students my age should be taught about HIV/AIDS in school.	1991	89	96
	1993	91	96
I think a student with HIV/AIDS should be allowed to go to my school.	1991	61	64
	1993	67	67
I would go to school with a student who had HIV/AIDS.	1991	63	67
	1993	70	72
I know where to get good information about HIV/AIDS.	1991	49	64
	1993	62	75
I know where to get tested to see if I am infected with HIV.	1991	48	58
	1993	55	71
I have talked about HIV/AIDS with a friend.	1991	41	64
	1993	53	74
I have talked about HIV/AIDS with a parent or other adult in my family.	1991	49	58
	1993	56	63

KNOWLEDGE OF HIV TRANSMISSION

Students who participated in the survey exhibited a high level of knowledge related to HIV/AIDS. Some highlights include:

- comparison of 1991 and 1993 survey responses indicated that all questions improved or stayed the same;
- comparison of 7th and 12th grade responses showed improvement on 15 of the 17 questions;
- no major variances from the composite were observed for subcategories including gender, ethnic group, area of residence, and type of school (public/nonpublic); and
- the percentage of correct responses among special services subcategories was somewhat lower than the composite.

Table 11
PERCENT OF STUDENTS RESPONDING CORRECTLY BY GRADE AND YEAR

		7th	12th
I know how to keep from getting the AIDS virus.	1991	86	93
	1993	93	95
You can get HIV by having sex with an infected person.	1991	94	96
	1993	97	99
You can get HIV by sharing needles of any kind.	1991	94	98
	1993	96	98
You can get HIV by receiving blood.	1991	*	*
	1993	87	86
A pregnant woman with HIV can infect her unborn baby.	1991	82	93
	1993	84	93
The chance of contracting HIV can be reduced by not having any kind of sexual intercourse (being abstinent).	1991	67	90
	1993	80	94

** not available on 1991 survey*

Table 12
COMMON MISCONCEPTIONS ABOUT HIV/AIDS
PERCENT OF STUDENTS RESPONDING CORRECTLY
BY GRADE AND YEAR

		7th	12th
You can get HIV by holding hands.	1991	90	95
	1993	96	97
You can't get HIV by being in class with someone with HIV/AIDS.	1991	86	92
	1993	93	95
Not just homosexual (gay) men can get HIV/AIDS.	1991	77	90
	1993	84	92
You can't tell if someone has HIV/AIDS by looking at them.	1991	78	86
	1993	83	88
There is no cure for HIV infection or AIDS.	1991	72	90
	1993	81	92
Birth control pills do not reduce the risk of contracting HIV.	1991	65	90
	1993	75	92
You can't get HIV from a public toilet.	1991	61	76
	1993	70	81
You can't get HIV from playing sports with someone with HIV/AIDS.	1991	*	*
	1993	69	63
You can't get HIV from kissing.	1991	*	*
	1993	58	67
You can't get HIV from being bitten by a mosquito or other insect.	1991	41	50
	1993	49	57
You can't get HIV by donating blood.	1991	26	53
	1993	46	66

** not available on 1991 survey*

CONCLUSIONS REGARDING HIV/AIDS

Missouri students currently exhibit a high level of knowledge about HIV transmission. The knowledge level continues to improve with time and with grade level.
Attitudes and beliefs related to HIV/AIDS are generally positive among Missouri students. Attitudes and beliefs continue to improve with time and with grade level.

GENERAL ADOLESCENT HEALTH PERSPECTIVE

Ninety-two percent of 7th grade students, 95% of 12th grade students and 87% of ABE students rate their general health as good, very good, or excellent, with males rating themselves higher than females. In 1993, as in 1991, more differences were noted in weight perceptions. One third of 7th grade female students perceive themselves as overweight; the number approaches half of 12th grade female students and nearly 60% of ABE females. More male students perceive themselves as overweight than in 1991. Special student data was not reported by gender, but 32% of all special 7th grade students and 36% of special 12th grade students perceive themselves to be overweight. Of students who rated their health as poor, 41% of 7th grade students and 31% of 12th grade students indicated they felt they have no control over their own health.

Table 13
PERCEPTIONS OF HEALTH, WEIGHT AND CONTROL OVER HEALTH BY GRADE, GENDER, AND ETHNICITY

	7th Grade								12th Grade								ABE	
Rating of	Gender		Ethnicity						Gender		Ethnicity							
General Health	M	F	W	B	H	A	AI	O	M	F	W	B	H	A	AI	O	M	F
Excellent	39	29	33	31	40	41	36	32	42	28	34	38	32	39	31	34	24	17
Very Good	35	39	38	31	29	35	33	30	39	42	40	35	35	42	39	33	31	35
Good	21	25	23	22	19	17	20	20	16	25	21	21	27	15	26	18	32	35
Fair	5	7	6	6	7	4	8	8	3	5	4	6	3	2	2	9	13	11
Poor	1	1	1	2	5	3	4	9	1	1	5	1	2	1	2	7	1	2
Perception of Weight																		
Slightly Overweight	23	28	26	19	25	26	25	21	21	36	29	22	30	24	25	28	24	42
Very Overweight	4	6	5	4	6	8	6	13	2	6	4	5	6	4	4	10	5	17
Slightly Underweight	15	14	14	14	13	18	15	14	20	10	15	14	14	16	23	11	16	6
Very Underweight	4	4	4	5	8	5	8	9	3	1	2	3	2	2	5	5	2	2
About Right	54	48	51	58	48	46	47	43	55	47	51	56	48	54	43	47	52	34
Control Over Own Health																		
A lot	67	65	66	66	64	63	61	58	74	68	71	73	68	64	73	60	70	57
Some	27	30	29	26	27	31	28	28	22	29	26	22	23	32	23	22	24	35
Little	4	4	4	6	5	4	6	7	2	3	3	3	7	3	5	5	4	6
None	3	1	2	4	5	4	6	8	2	6	8	2	2	2	2	13	2	2

PERSONAL IMPORTANCE OF VARIOUS HEALTH TOPICS

Not drinking while driving and not riding with a driver who has been drinking ranked highest in importance of health topics for students in both 7th and 12th grades. As in 1991, there was a significant decline of importance between 7th and 12th grade students in regard to not drinking any alcohol at all. A major concern is that the importance of all of the topics declined between 1991 and 1993, some as much as 19%.

Table 14
PERCENT OF STUDENTS RATING HEALTH TOPICS AS BEING VERY IMPORTANT BY GRADE AND YEAR

		7th	12th
Not drinking while driving	1991	*	*
	1993	80	75
Not riding with driver who has been drinking	1991	*	*
	1993	79	73
Not taking or experimenting with drugs	1991	80	68
	1993	69	59
Not smoking cigarettes	1991	71	55
	1993	60	48
Getting help for health problem	1991	*	*
	1993	55	48
Not drinking any alcohol at all	1991	64	29
	1993	53	25
Not being overweight	1991	55	60
	1993	43	48
Getting exercise	1991	46	44
	1993	41	41
Wearing a seatbelt	1991	51	40
	1993	39	39
Talking about personal problems or feelings	1991	*	*
	1993	34	36
Eating breakfast daily	1991	47	27
	1993	36	23
Eating enough fiber	1991	35	35
	1993	29	16
Not eating too much fat	1991	32	20
	1993	25	18

**not included on 1991 survey*

KNOWLEDGE ABOUT BEHAVIORS THAT CAUSE ILLNESS

Knowledge about behaviors that cause serious illness was higher among students who marked that they had learned about the topic in school. Students' knowledge about having unprotected sex (91%) and smoking causing serious illness (81%) was higher than their knowledge about other behaviors. However, as in 1991, 50% of 7th grade students and 25% of 12th grade students did not know that being overweight and not getting enough exercise could cause serious illness. Also, one third of 7th and 12th grade students did not know that too much stress can cause serious illness (see Figure 8).

CONSIDERATION OF SUICIDE

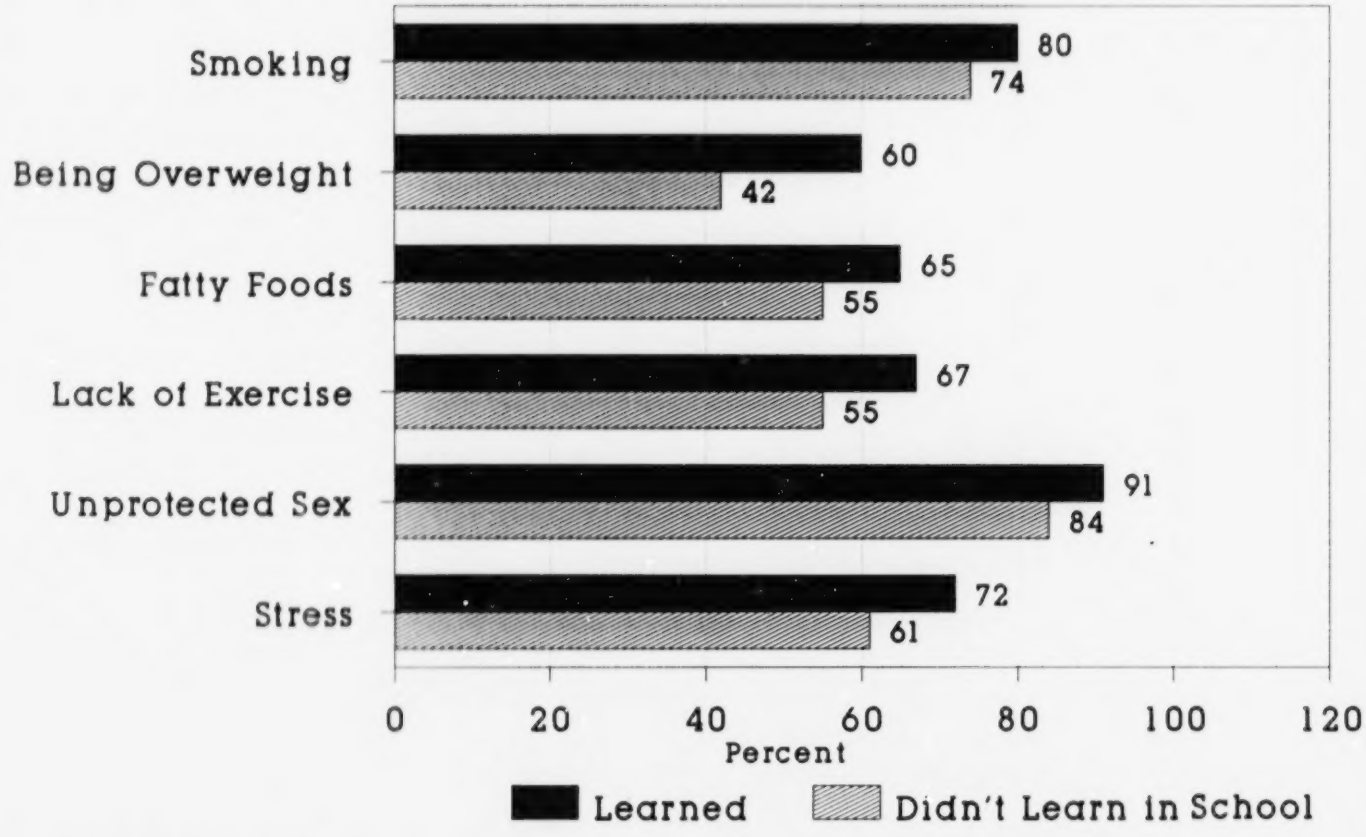
The suicide rate for 15- to 24-year-olds has tripled since 1950, according to the U. S. Department of Health and Human Services. Because of this growing concern, the 1993 survey was revised to collect data regarding students' consideration of attempting suicide. Public and nonpublic rates were about the same for 7th and 12th grade students, but special students' rates were much higher, with 31% of 7th and 12th grade special students surveyed having seriously considered suicide in the past 12 months (see Figure 9).

Additionally, of the students who indicated they use alcohol to relax or relieve tension, 44% of 7th grade public, nonpublic and special students and 21% of 12th grade public, nonpublic and special students indicated they have seriously considered suicide (see Figure 10).

USEFULNESS OF HEALTH CLASSES

Students' perceptions of the usefulness of health classes increase as they progress in school. Seventy-eight percent of 7th grade students, 80% of 12th grade students, and 86% of ABE students indicated they found health classes to be useful. There was a 10 to 12% difference between male and female responses among 7th grade, 12th grade, and ABE students (see Figure 11).

Figure 8. KNOWLEDGE ABOUT BEHAVIORS THAT CAUSE SERIOUS ILLNESS COMPARED TO WHETHER THEY HAVE LEARNED ABOUT TOPICS AT SCHOOL



7th and 12th Grade

Figure 9. PERCENTS OF STUDENTS WHO HAVE SERIOUSLY CONSIDERED SUICIDE IN THE PAST 12 MONTHS BY GRADE

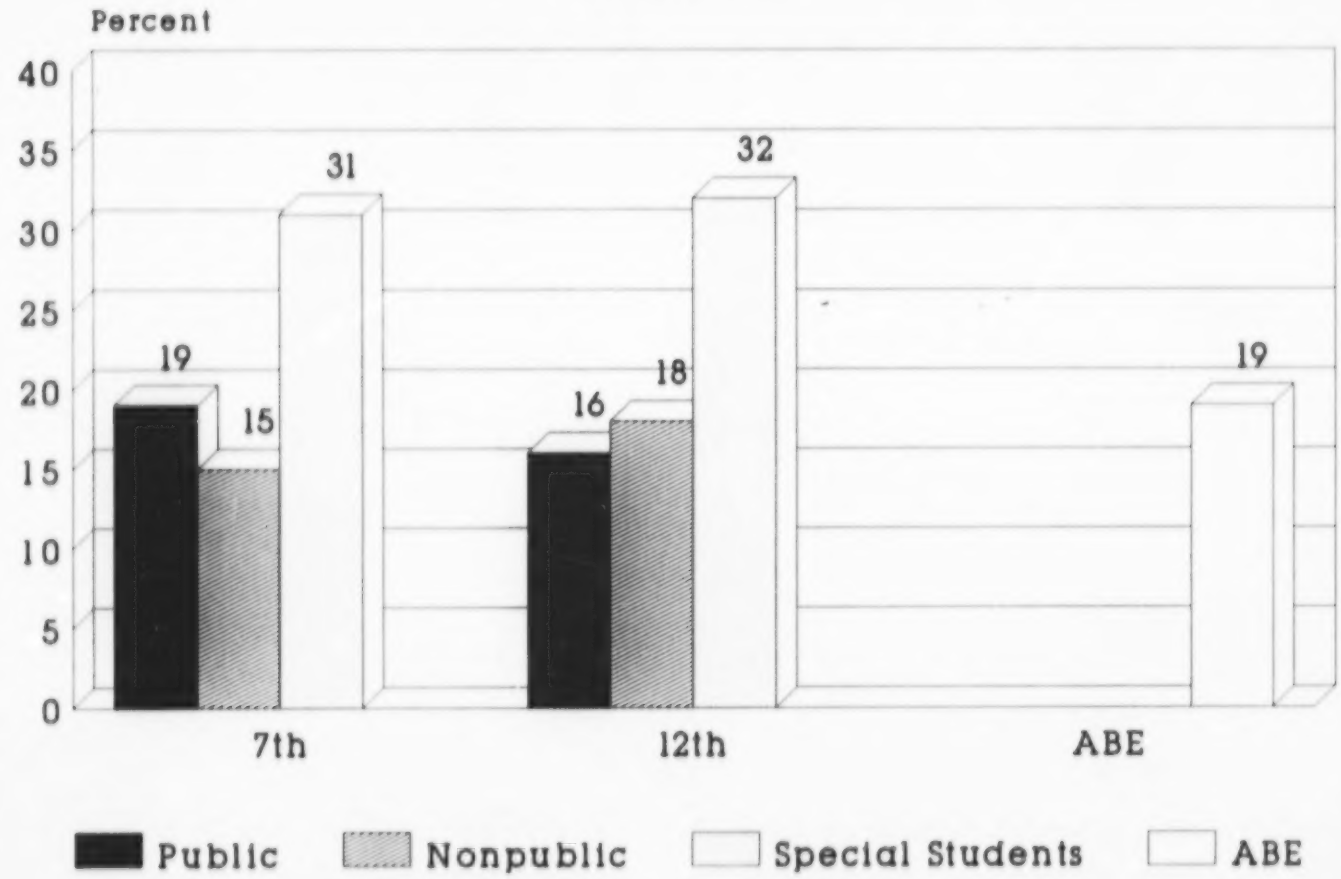


Figure 10. CONSIDERATION OF SUICIDE COMPARED TO ALCOHOL USE

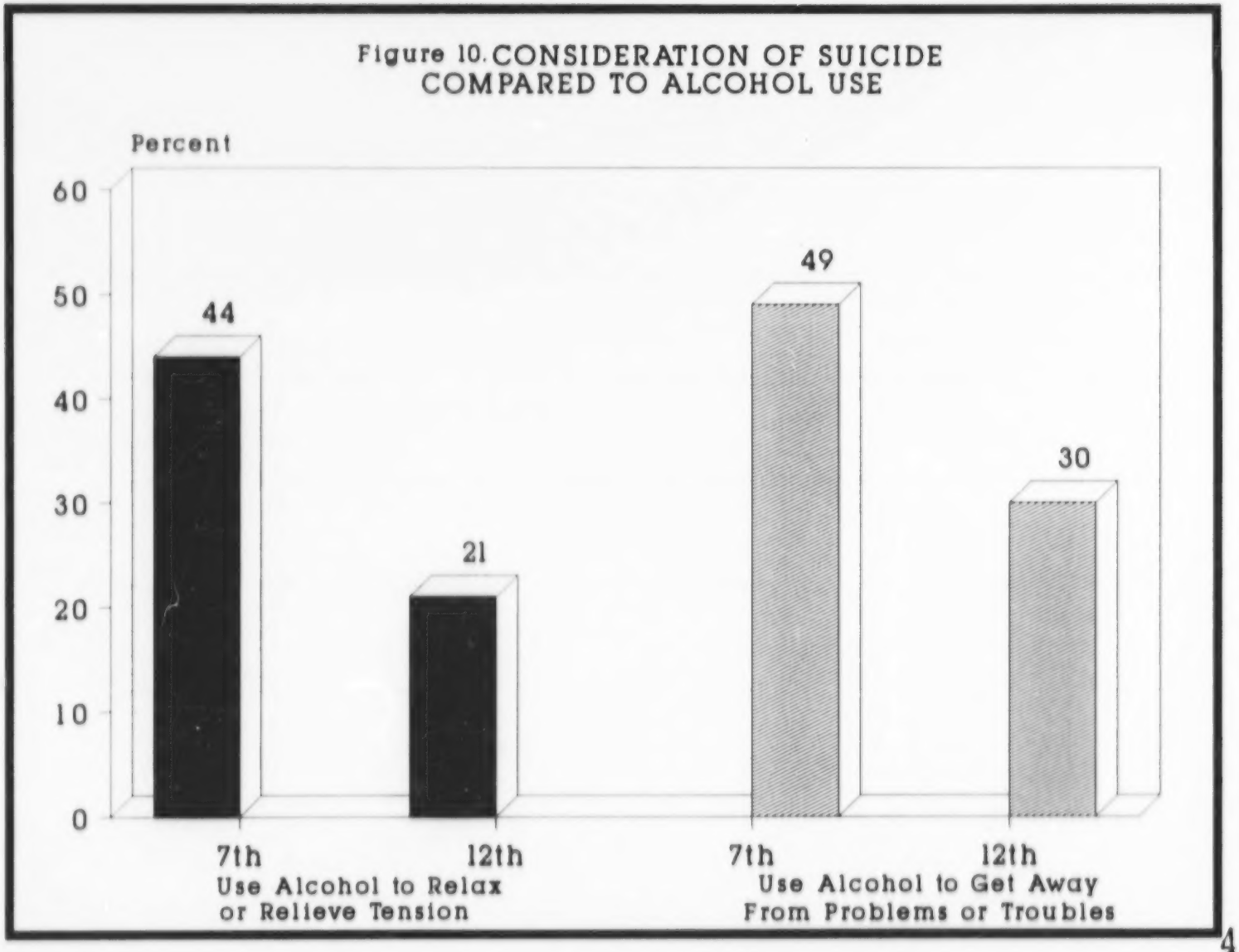
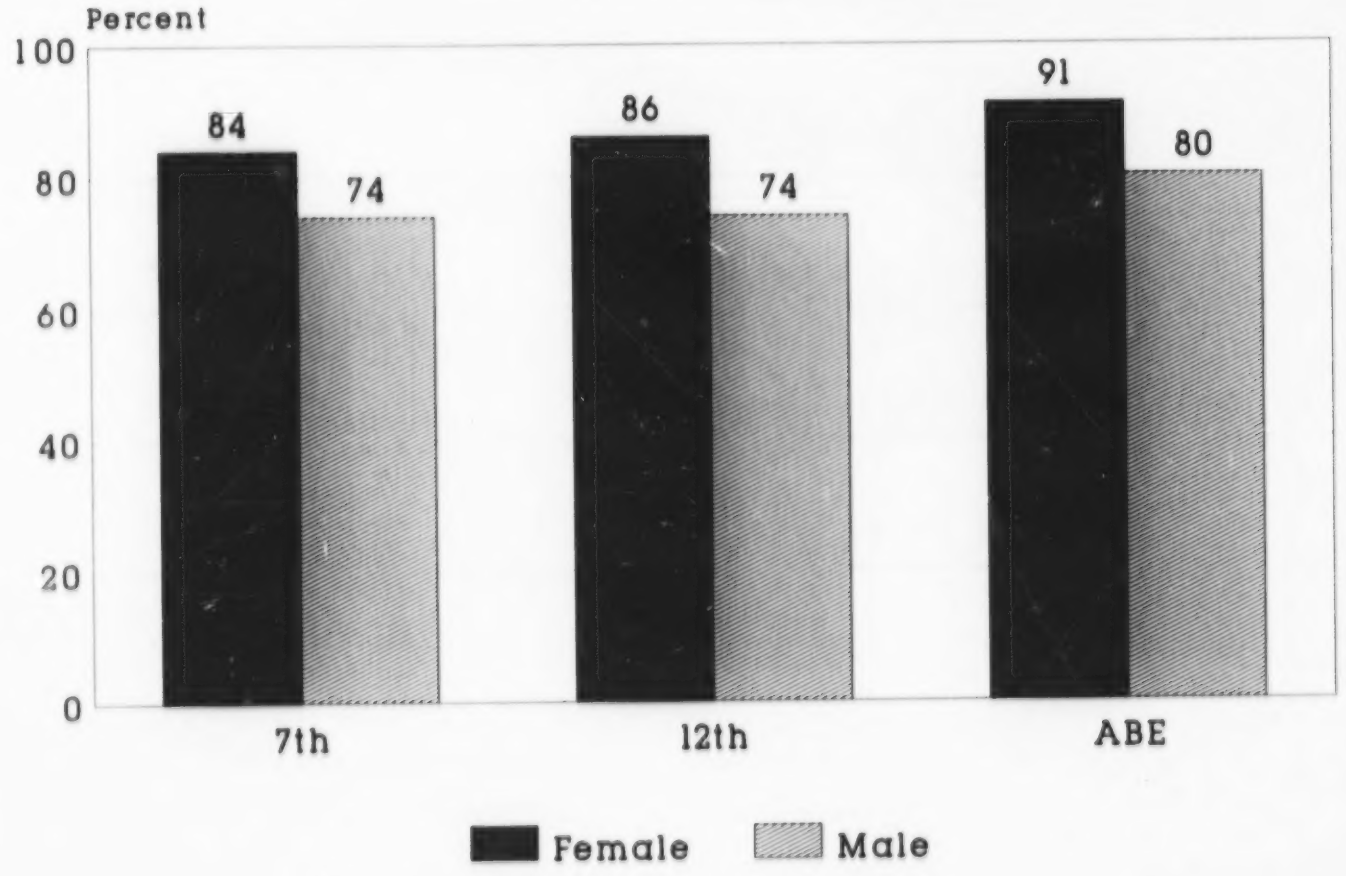


Figure 11. STUDENTS WHO FIND HEALTH CLASSES USEFUL BY GRADE AND GENDER



HEALTH TOPICS LEARNED

Comparison of 1991 to 1993 responses indicated that the health topics learned remained the same or decreased slightly with these exceptions: learning about AIDS increased 9%, learning about suicide increased 4%, learning about the need for exercise and stress each decreased 4%.

As in 1991, drinking and smoking remain at the top of the list of health topics learned, while mental health issues remain at the bottom (see Figure 12).

CONCLUSIONS REGARDING GENERAL HEALTH

Ninety-one percent of all students surveyed perceive their general health to be good, very good, or excellent. One third of 7th grade females, one half of 12th grade females, and over one half of ABE females perceive themselves to be overweight. Students who perceive their health to be poor also indicated they feel they have no control over their own health.

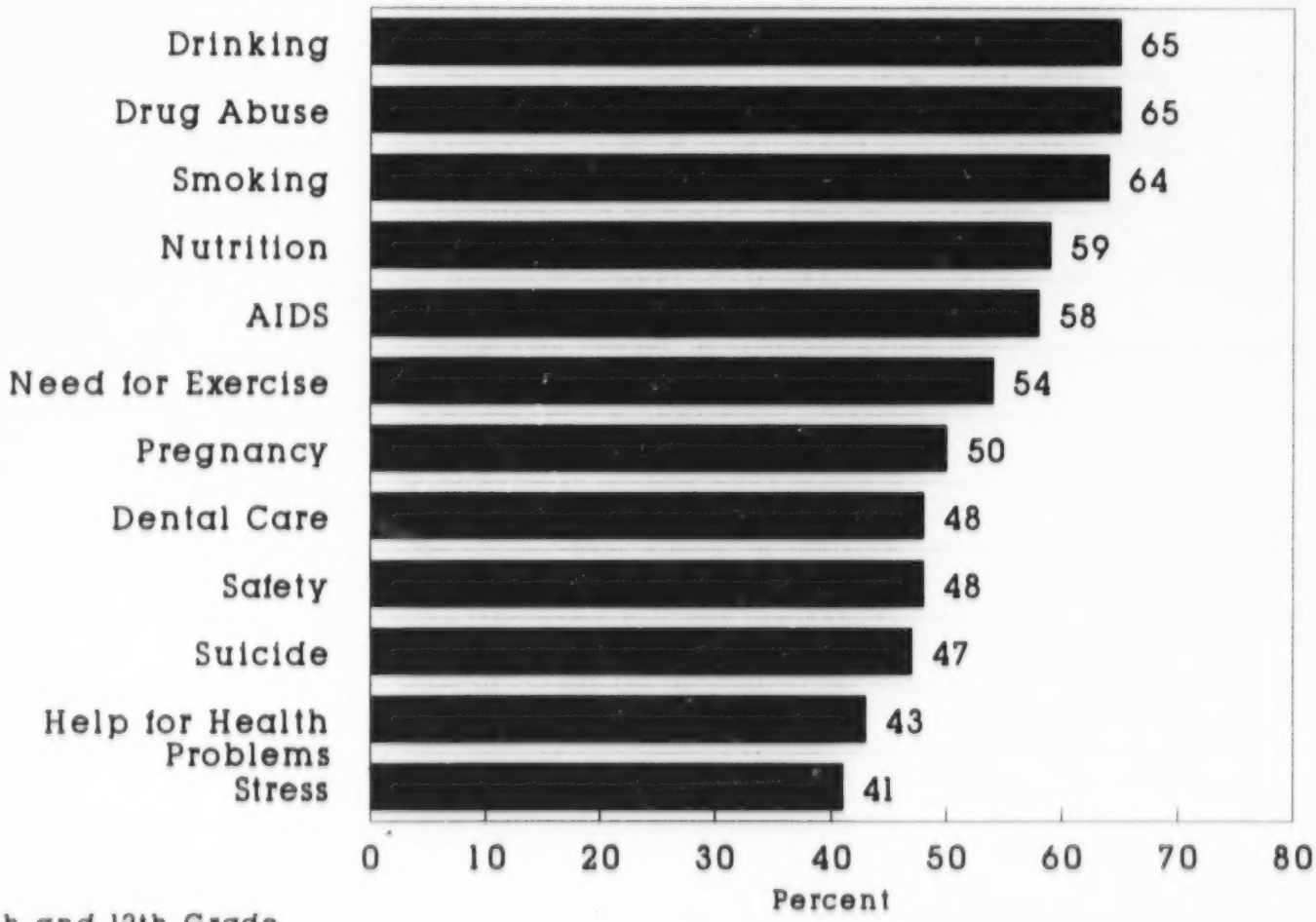
There was a 28% decline in students' attitudes about the importance of not drinking between the 7th and 12th grades. The importance of all of the topics to students declined between 1991 and 1993, some as much as 19%. Nutrition topics are low in importance, and knowledge of those issues causing serious illness remains low.

Consideration of suicide rates for students in all grades is a concern, but especially among the special student population. There was a high correlation between responses of students who use alcohol to relax or relieve tension and those who indicated they have seriously considered suicide.

There remained a high percentage of students who perceive health classes to be useful; however, the percentage is much higher for females than for males.

There were no significant gains in percentages of health topics learned except in HIV/AIDS.

Figure 12. PERCENT OF THOSE HAVING LEARNED ABOUT HEALTH TOPICS



7th and 12th Grade

Conclusions of the summary

There was a decline in the number of students who perceive drug education to be of value to them, but there was an increase in student use of cigarettes, alcohol and marijuana from the 1991 survey.

Missouri seniors reported higher use of inhalants, alcohol, and cigarettes than the national rates for seniors reported in the 1992 Monitoring the Future survey.

As in 1991, the universality of drug use was demonstrated by relatively little differentiation across locales, except smokeless tobacco abuse was reported to be higher in rural areas and binge drinking was reported higher in suburban and rural areas than in urban areas. There continues to be a differentiation of use among ethnic groups. Female use remains consistently lower than male use for all drugs.

Nearly 40% of all females surveyed perceive themselves to be overweight, while the knowledge that being overweight can cause serious illness remains low, as does the percentage of students who have learned about this in school.

Attitudes regarding the importance of health topics declined between 1991 and 1993, and there were no significant gains in percentages of health topics learned except in HIV/AIDS.

Knowledge regarding HIV/AIDS continues to improve with time and with grade level. Attitudes related to HIV/AIDS are generally positive.

This is the first year that data was available for students receiving special services, as a separate category. A review of this data indicates some responses that are not significantly different from students receiving regular education and some responses from that group that make the reality of those responses questionable. Two responses warrant consideration:

1. The number of students in special education reporting no participation in clubs or activities was 16% higher than the number of regular education students reporting no participation in both 7th and 12th grade.
2. The number of special education students reporting having seriously considered suicide in the last 12 months was 12% higher in 7th grade and 15% higher in 12th grade than the number of regular education students reporting the same.

Recommendations

If Missouri is to succeed in protecting the health of our youth, there must be a major commitment from schools, churches, families, and community agencies to work together to ensure that health behavior risks of youth are addressed in a coordinated manner.

Comprehensive health instruction within the broader Comprehensive School Health Program must be provided through sequential, age, and developmentally appropriate curricular activities that are skill based. Including all of the other components of a Comprehensive School Health Program (a safe and healthy environment, quality food service, quality physical education program, guidance and counseling program, wellness program for staff and an integrated school and community approach) will greatly enhance the classroom instruction of health topics.

Health instruction must be implemented at adequate levels beyond the elementary years, because students need reinforcement and continued learning during the years that risk-taking behaviors are at their highest.

All health topics must be presented in a manner that allows students to have a full understanding of the positive aspects of healthy behaviors as well as the negative consequences of unhealthy behaviors.

Adequate time for teaching health topics is critical. Research studies indicate that 10 hours of instruction will impact on knowledge, but 40 to 50 hours of instruction is needed to impact attitudes and behaviors.

Students receiving special services need to be addressed in planning curriculum for health issues and extracurricular activities. Skill-based instruction should be employed to enable students to utilize their knowledge in ways that lower risk-taking behavior. Knowledge alone is not sufficient to improve or change behaviors.

APPENDIX A

Student Health Survey

MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

STUDENT HEALTH SURVEY

This is not a test. This survey asks a number of questions about drug use and other health related issues. We are asking students across the state of Missouri to answer these questions, and it is important for you to be thoughtful and honest in your answers.

To protect your privacy, please do not put your name anywhere on this booklet. Neither your teacher nor anyone else will read your answers. This is a voluntary survey. If you choose to fill it out, please answer all questions. Thank you for your help.

PLEASE READ MARKING DIRECTIONS CAREFULLY.

MARKING DIRECTIONS

Use a number 2 pencil only.

Make marks dark and heavy.

Erase carefully any answer you wish to change.

Do not make extra marks on the booklet.

Examples of GOOD Marks:	Examples of BAD Marks:
●○○●○	⊗○○⊘○

1. **In which of the following clubs or activities are you presently a member? (Mark all that apply to you.)**

- ○ Orchestra, band, glee club, dramatics, or debate
- ○ School athletics, varsity clubs, or intramurals
- ○ Cheerleaders, or pep club
- ○ Student government
- ○ School newspaper, magazine or yearbook
- ○ Hobby clubs or subject-matter clubs (chess, Latin, math, stamps, etc.)
- ○ National Honor Society
- ○ Service clubs (Hi-Y, Key Club, TREND, etc.)
- ○ Community activities (FFA, FHA, 4-H, etc.)
- ○ I do not take part in any of these.

2. **Some parents have rules for their children, while others don't. For which of the following areas have your parents made definite rules for you to follow? (Mark all that apply to you.)**

- ○ Time for being in at night
- ○ Homework
- ○ Dating
- ○ Time spent watching television
- ○ Going around with certain boys
- ○ Going around with certain girls
- ○ Helping around the house
- ○ Dress and hair styles
- ○ Against smoking cigarettes
- ○ Against using smokeless tobacco
- ○ Against drinking alcohol
- ○ Against using marijuana
- ○ Against using cocaine, sedatives and other illegal drugs
- ○ None of the above apply to me

3. **How difficult do you think it would be for you to get each of the following types of drugs, if you wanted some? (Mark one circle for each drug below.)**

	Probably Impossible	Very Difficult	Fairly Difficult	Fairly Easy	Very Easy
Marijuana	○	○	○	○	○
LSD	○	○	○	○	○
Other psychedelics (mescaline, "peyote," PCP, etc.)	○	○	○	○	○
Tranquilizers	○	○	○	○	○
Cocaine ("crack")	○	○	○	○	○
Heroin ("smack," "horse")	○	○	○	○	○
Cigarettes or smokeless tobacco	○	○	○	○	○
Alcohol (including beer)	○	○	○	○	○
Stimulants ("speed")	○	○	○	○	○

4. **This question asks for your opinions on the effects of using certain drugs and other substances. How much do you think people risk harming themselves (physically or in other ways) if they . . .**

	No Risk	Slight Risk	Moderate Risk	Great Risk
Smoke one or more packs of cigarettes per day	○	○	○	○
Smoke marijuana once or twice	○	○	○	○
Smoke marijuana regularly	○	○	○	○
Try LSD once or twice	○	○	○	○
Use LSD regularly	○	○	○	○
Try heroin or cocaine ("crack") once or twice	○	○	○	○
Use heroin or cocaine ("crack") regularly	○	○	○	○
Try barbiturates once or twice ("downers," "reds," "goofballs," etc.)	○	○	○	○
Use barbiturates regularly	○	○	○	○
Try amphetamines once or twice ("uppers," "bennies," "speed," etc.)	○	○	○	○
Use amphetamines regularly	○	○	○	○
Try one or two drinks of alcoholic beverage (beer, wine or liquor)	○	○	○	○
Take one or two drinks nearly every day	○	○	○	○
Use smokeless tobacco regularly (chewing tobacco, plug, snuff, etc.)	○	○	○	○

The Following Questions Are About Cigarette Smoking and Smokeless Tobacco

5. Have you ever smoked a cigarette?

○ No ○ Yes, but only once ○ Yes, more than once

6. How frequently have you smoked cigarettes during the last 30 days?

Not at all	Less than 1 cigarette per day	1-5 cigarettes per day	About one-half pack per day	About 1 pack per day	About 1 1/2 packs per day	2 or more packs per day
○	○	○	○	○	○	○

7. How old were you when you first tried smoking a cigarette?

I have never tried smoking a cigarette	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

8. Have you ever tried or used smokeless tobacco (snuff, plug, dipping tobacco, chewing tobacco)?

○ No ○ Yes, but only once ○ Yes, more than once

9. How frequently have you used smokeless tobacco during the last 30 days?

Not at all	Once or twice	Once or twice per week	3-5 times per week	About once a day	More than once a day
○	○	○	○	○	○

10. How old were you when you first tried snuff or chewing tobacco?

I have never tried snuff or chewing tobacco	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

Next, We Want To Ask You About Drinking Alcohol.

11. Have you ever had any beer, wine or liquor to drink?

○ No ○ Yes

12. How many times, if any, have you had beer, wine or liquor to drink...

a. In your whole life?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. During the last 12 months?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. During the last 30 days?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

13. How old were you when you first tried a drink (more than just a few sips) of beer, wine or liquor?

I have never tried a drink	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

14. Think back over the LAST TWO WEEKS. How many times have you had five or more drinks in a row? (A "drink" is a glass of wine, a bottle or can of beer, a shot glass of liquor, or a mixed drink.)

None	Once	Twice	3-5 times	6-9 times	10 or more times
○	○	○	○	○	○

The Next Few Questions Concern Various Types of Drugs

15. How many times, if any, have you used marijuana ("grass," "pot") or hashish ("hash," "hash oil")...

a. In your whole life?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. During the last 12 months?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. During the last 30 days?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

16. How old were you when you first tried marijuana ("grass," "pot") or "hash"?

I have never tried marijuana or "hash"	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○	○

17. How many times, if any, have you used LSD ("acid," "window pane," "purple haze")...

a. In your whole life?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. During the last 12 months?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. During the last 30 days?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

18. How many times, if any, have you used cocaine (sometimes called "coke," "crack," and "rock")...

a. In your whole life?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. During the last 12 months?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. During the last 30 days?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

19. **Amphetamines are sometimes called "uppers," "speed," "bennies," "dexies," and "pep pills". Amphetamines do NOT include diet pills (like Dexatrim) or stay-awake pills (like NO-DOZ), or any mail-order drugs.**

How many times, if any, have you taken amphetamines on your own--that is, without a doctor telling you to take them...

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

20. **How many times, if any, have you used quaaludes ("ludes," Methaqualone) on your own--that is, without a doctor telling you to take them...**

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

21. **Barbiturates are sometimes called "downs," "downers," "goofballs," "yellows," "reds," "blues," and "rainbows". How many times, if any, have you taken barbiturates on your own--that is, without a doctor telling you to take them...**

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

22. **Tranquilizers are sometimes prescribed by doctors to calm people down, quiet their nerves, or relax their muscles. Librium, Valium and Miltown are all tranquilizers.**

How many times, if any have you taken tranquilizers on your own--that is, without a doctor telling you to take them...

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

23. **How many times, if any, have you used heroin ("smack," "horse," "skag")...**

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

24. **How many times, if any, have you used designer drugs ("Adam," "Eve," MDMA, MDE, "Ecstasy," MPTP)...**

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

25. **How many times, if any, have you sniffed glue, or breathed the contents of aerosol spray cans, or inhaled Toluene ("tullo") in order to get high...**

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

26. **Some stay-awake pills can be sold legally without a doctor's prescription by drugstores, through the mail, etc. These drugs include NO-DOZ, Vivarin, Wake, Caffedrine, Mini Thin and others.**

How many times, if any, have you taken such stay-awake pills...

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

27. **Steroids are sometimes used by athletes to help build muscle.**

How many times, if any, have you used steroids on your own--that is, without a doctor telling you to take them...

a. **In your whole life?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. **During the last 12 months?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. **During the last 30 days?**

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

28. How many times, if any, have you used Phencyclidine (PCP, "wack," "water")...

a. In your whole life?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

b. During the last 12 months?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

c. During the last 30 days?

None	1-2 times	3-5 times	6-9 times	10-19 times	20-39 times	40 or more times
○	○	○	○	○	○	○

29. Here are some reasons people give for <u>not</u> using marijuana ("grass," "pot," "hash"), or for stopping use. Please tell us which reasons are true for you. (Mark all that apply to you.)

- ○ Worried about possible psychological damage
- ○ Worried about getting arrested
- ○ Worried about possible physical damage
- ○ Worried about becoming addicted to marijuana
- ○ Worried about loss of energy or ambition
- ○ Worried about possible loss of control of myself
- ○ It might lead to stronger drugs
- ○ I don't like being with the people who use it
- ○ My boyfriend/girlfriend (husband/wife) would disapprove
- ○ It's against my beliefs
- ○ Don't feel like getting high
- ○ My friends don't use it
- ○ Hard to get it
- ○ I might have a bad trip
- ○ Too expensive
- ○ My parents would disapprove
- ○ Not enjoyable, I didn't like it
- ○ None of these apply to me

30. If you have used marijuana or hashish, what were the most important reasons for your using it? (Mark all that apply to you.)

- ○ I have not tried marijuana or hashish (Go directly to next item.)
- ○ To decrease (offset) the effects of some other drug(s)
- ○ To seek deeper insights and understanding
- ○ To increase the effects of some other drug(s)
- ○ To get away from my problems or troubles
- ○ Because of boredom, nothing else to do
- ○ Because I am "hooked"--I have to have it
- ○ To feel good or get high
- ○ To relax or relieve tension
- ○ To fit in with a group I like
- ○ To get through the day
- ○ Because of anger or frustration
- ○ To have a good time with my friends
- ○ To experiment--to see what it's like

31. Here are some reasons people give for not using cigarettes, or for stopping use. (Mark all that apply to you.)

- ○ Worried about possible physical damage
- ○ Worried about becoming addicted
- ○ It might lead to stronger drugs
- ○ I don't like being with the people who use them
- ○ My boyfriend/girlfriend (husband/wife) would disapprove
- ○ It's against my beliefs
- ○ My friends don't use them
- ○ Hard to get them
- ○ Too expensive
- ○ My parents would disapprove
- ○ Not enjoyable, I didn't like them
- ○ None of these apply to me

32. What do you think is the main reason why you started smoking cigarettes regularly (daily)? (Mark only one.)

- ○ I don't smoke cigarettes daily (Go directly to next item.)
- ○ I liked the physical effect (how it makes me feel)
- ○ My friends smoke
- ○ My mother smokes
- ○ My father smokes
- ○ My sister smokes
- ○ My brother smokes
- ○ People I admire smoke
- ○ After I tried it, I couldn't stop
- ○ None of these apply to me

33. Here are some reasons people give for not using alcohol (including beer), or for stopping use. (Mark all that apply to you.)

- ○ Worried about possible psychological damage
- ○ Worried about getting arrested
- ○ Worried about possible physical damage
- ○ Worried about becoming addicted
- ○ Worried about possible loss of control of myself
- ○ It might lead to stronger drugs
- ○ I don't like being with the people who use it
- ○ My boyfriend/girlfriend (husband/wife) would disapprove
- ○ It's against my beliefs
- ○ Don't feel like getting high
- ○ My friends don't use it
- ○ Hard to get it
- ○ I might get sick
- ○ Too expensive
- ○ My parents would disapprove
- ○ Not enjoyable, I didn't like it
- ○ None of these apply to me

34. If you have used alcohol (including beer), what were the most important reasons for your using it? (Mark all that apply to you.)

- ○ I have not used alcohol (including beer) (Go directly to next item.)
- ○ To decrease (offset) the effects of some other drug(s)
- ○ To increase the effects of some other drug(s)
- ○ To get away from my problems or troubles
- ○ Because of boredom, nothing else to do
- ○ Because I am "hooked"--I have to have it
- ○ To feel good or get high
- ○ To relax or relieve tension
- ○ To fit in with a group I like
- ○ To get through the day
- ○ Because of anger or frustration
- ○ To have a good time with my friends
- ○ To experiment--to see what it's like

Since many students in different schools and grades are answering this questionnaire, we need to ask a few more questions about your age and grade, etc.

35. I go to an (Mark only one): ○ ABE Center ○ public school ○ nonpublic school

36. How old are you now? ⑩ ⑪ ⑫ ⑬ ⑭ ⑮ ⑯ ⑰ ⑱ ⑲ ⑳+

37. What grade are you in now? ○ 6th ○ 7th ○ 8th ○ 9th ○ 10th ○ 11th ○ 12th

38. What were your grades last semester? (Mark only one.)

○ Mostly A's ○ Mostly B's ○ Mostly C's ○ Mostly D's ○ Mostly F's

39. Are you receiving special services for any of the following reasons? (Mark all that apply to you.)

- ○ I do not receive any of these special services (Go directly to next item.)
- ○ Learning Disabilities
- ○ Gifted
- ○ Hearing Impaired
- ○ Mental Retardation
- ○ Behavioral Disorders
- ○ Physically or Other Health Impaired
- ○ Visually Impaired
- ○ Speech / Language
- ○ Other
- ○ Traumatic Brain Injury

40. Are you a male or female? ○ male ○ female

41. Are you... ○ White ○ Black or African-American ○ Asian / Pacific Islander ○ Hispanic ○ Indian Native American ○ Other

42. What is the highest level of schooling your parents or guardians have completed? (Mark once for Father and once for Mother)

Father	Mother	
○	○	Grade school or less
○	○	Some high school
○	○	High school
○	○	Some college
○	○	College
○	○	Graduate/Professional school after college
○	○	Don't know, or does not apply

43. Which of the following people live in the same household with you? (Mark all that apply.)

- ○ I live alone
- ○ Natural mother
- ○ Foster parents
- ○ Stepfather
- ○ Brothers and/or sisters
- ○ Natural father
- ○ Other relatives
- ○ Friends
- ○ Stepmother
- ○ Other adults

44. During the LAST FOUR WEEKS, how many whole days of school have you missed...

	None	1 Day	2 Days	3 Days	4 to 5 Days	6 to 10 Days	11 or More
a. Because of illness	○	○	○	○	○	○	○
b. Because you skipped or "cut"	○	○	○	○	○	○	○

45. Since school started in September, how many times have you...(Mark one circle for each line.)

	Not at all	Once	Twice	3 or 4 times	5 or more times
a. Come home too late from a date or being with friends, etc?	○	○	○	○	○
b. Cheated on a test question?	○	○	○	○	○
c. Gotten into a serious fight in school or at work?	○	○	○	○	○
d. Been suspended from school?	○	○	○	○	○
e. Taken something not belonging to you worth under $50?	○	○	○	○	○
f. Taken something from a store without paying for it?	○	○	○	○	○
g. Been high or drunk during school hours?	○	○	○	○	○
h. Run away from home	○	○	○	○	○

46. Some people like school very much. Others don't. How do you feel about going to school?

- ○ I like school very much
- ○ I like school quite a lot
- ○ I like school some
- ○ I don't like school very much
- ○ I don't like school at all

47. How many of the following drug education experiences have you had in school? (Mark all that apply.)

- ○ A special unit about drugs
- ○ Films, lectures, or discussions in one of my regular classes
- ○ Films or lectures, outside of my regular courses
- ○ Special discussions about drugs
- ○ One-on-one discussion with a counselor

48. Overall, how valuable were these drug education experiences to you?

- ○ Little or no value
- ○ Considerable value
- ○ Some value
- ○ Great value

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DO NOT CONTINUE UNLESS TOLD TO DO SO.

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49. Should students your age be taught about AIDS/HIV infection in school?

○ Yes ○ No ○ Not Sure

50. Should a student with AIDS/HIV infection be allowed to go to your school?

○ Yes ○ No ○ Not Sure

51. Would you be willing to be in the same class with a student with AIDS/HIV infection?

○ Yes ○ No ○ Not Sure

52. Do you know where to get good information about AIDS/HIV infection?

○ Yes ○ No ○ Not Sure

53. Do you know where to get tested to see if you are infected with the AIDS virus?

○ Yes ○ No ○ Not Sure

54. Do you know how to keep from getting the AIDS virus?

○ Yes ○ No ○ Not Sure

55. Have you ever talked about AIDS/HIV infection with a friend?

○ Yes ○ No ○ Not Sure

56. Have you ever talked about AIDS/HIV infection with your parents or other adults in your family?

○ Yes ○ No ○ Not Sure

57. Can a person get AIDS/HIV infection by:

Yes	No	Not sure		Yes	No	Not sure	
○	○	○	Holding hands with someone?	○	○	○	Having sex with an infected person?
○	○	○	Sharing needles of any kind?	○	○	○	Being in the same class with a student with AIDS / HIV infection?
○	○	○	Receiving blood?	○	○	○	Being bitten by a mosquito or other insect?
○	○	○	Donating blood?	○	○	○	Kissing?
○	○	○	Using a public toilet?	○	○	○	Playing sports with someone who is HIV infected?

58. Can you tell if people are infected with the AIDS virus by looking at them?

○ Yes ○ No ○ Not Sure

59. Can a pregnant woman who has the AIDS virus infect her unborn baby with the virus?

○ Yes ○ No ○ Not Sure

60. Is there a cure for AIDS / HIV infection?

○ Yes ○ No ○ Not Sure

61. Is it true only homosexual (gay) men can get AIDS / HIV infection?

○ Yes ○ No ○ Not Sure

62. **Can people reduce their chances of becoming infected with the AIDS virus by not having any kind of sexual intercourse (being abstinent)?**

○ Yes ○ No ○ Not Sure

63. **Can people reduce their chances of becoming infected with the AIDS virus by not having any kind of sexual intercourse with a person who has injected (shot up) drugs?**

○ Yes ○ No ○ Not Sure

64. **Can people reduce their chances of becoming infected with the AIDS virus by taking birth control pills?**

○ Yes ○ No ○ Not Sure

65. **How would you describe your own health?**

○ Excellent ○ Very good ○ Good ○ Fair ○ Poor

66. **How do you think of yourself?**

○ Very underweight
○ Slightly underweight
○ About the right weight
○ Slightly overweight
○ Very overweight

67. **How important is each of the following to you?**

Very Important	Somewhat Important	Not Very Important	Not at all Important	
○	○	○	○	Not being overweight
○	○	○	○	Not taking or experimenting with drugs
○	○	○	○	Not eating too many fatty foods
○	○	○	○	Eating enough fiber from whole grains, cereals, fruits, and vegetables
○	○	○	○	Not drinking any alcohol at all
○	○	○	○	Not smoking cigarettes
○	○	○	○	Getting exercise for at least twenty minutes three or more times each week
○	○	○	○	Eating breakfast every day
○	○	○	○	Wearing a seatbelt when riding in the front seat of a car
○	○	○	○	Not drinking while driving
○	○	○	○	Not riding in a vehicle with a driver who has been drinking
○	○	○	○	Talking to someone about your personal problems or feelings
○	○	○	○	Getting help for your health problems

68. **Which of the following are common causes of serious illness?**

Yes	No	
○	○	Smoking
○	○	Being overweight
○	○	Eating too many fatty foods
○	○	Not getting enough exercise
○	○	Drinking a lot of water
○	○	Air and water pollution
○	○	Having unprotected sex
○	○	Too much stress

69. At school have you ever had any class in health education as a separate subject?

○ Yes ○ No

70. Have you had health in just one grade, two grades, or more?

○ One ○ Two ○ More than two grades

71. Have you had health as part of some other class?

○ Yes ○ No

72. Which of the following have you learned about in class at school?
CHECK AS MANY AS APPLY

○ The food you should and shouldn't eat
○ The importance of exercise
○ Smoking
○ The problems of being overweight
○ Drinking
○ Drug abuse
○ Pregnancy
○ AIDS
○ What to do if a stranger approaches you
○ Taking care of your teeth
○ What to do if someone chokes on food
○ Safety at home, school, or play
○ Stress
○ Personal feelings
○ Where to go for help with a health problem
○ The problems of being underweight
○ Suicide

73. Do you find health classes more interesting or less interesting than other classes?

○ More ○ Less ○ About the same

74. Do you find them useful?

○ Useful ○ Not useful

75. How much control do you think you have over your own health?

○ A lot ○ Some ○ Very little ○ None at all

76. During the past 12 months, have you seriously considered suicide?

○ Yes ○ No

77. Are you taking or have you taken on a regular basis within the last year PRESCRIBED medication for emotional problems (such as antidepressant medication for anxiety)?

○ Yes ○ No

THANK YOU
FOR COMPLETING THIS SURVEY.

APPENDIX B

School District Listings By Locale

(Locales 1 and 2)

Locale 1 (Urban)

011-082	St. Joseph School District
039-141	Springfield R-XII School District
048-077	Independence 30 School District
048-078	Kansas City 33 School District
096-104	Jennings School District
096-109	Normandy School District
096-111	Riverview Gardens School District
096-112	University City School District
096-115	Wellston School District
115-115	St. Louis City School District

Locale 2 (Suburban)

010-093	Columbia 93 School District
012-109	Poplar Bluff R-I School District
019-149	Harrisonville R-IX School District
024-089	Excelsior Springs 40 School District
024-090	Liberty 53 School District
024-093	North Kansas City 74 School District
026-006	Jefferson City School District
048-066	Fort Osage R-I School District
048-068	Blue Springs R-IV School District
048-069	Grain Valley R-V School District
048-071	Lee's Summit R-VII School District
048-072	Hickman Mills C-I School District
048-073	Raytown C-2 School District
048-074	Grandview C-4 School District
048-080	Center 58 School District
050-002	Grandview R-II School District
050-003	Hillsboro R-III School District
050-005	Dunklin R-V School District
050-006	Festus R-VI School District
050-007	Jefferson Co. R-VII School District
050-009	Sunrise R-IX School District
050-010	Windsor C-1 School District
050-012	Fox C-6 School District
050-013	Crystal City 47 School District
050-014	DeSoto 73 Schoool District
083-003	Platte Co. R-III School District
083-005	Park Hill R-V School District
092-087	Ft. Zumwalt R-II School District
092-088	Francis Howell R-III School District
092-089	Wentzville R-IV School District
092-090	St. Charles R-VI School District
092-091	St. Charles Co. R-V School District
096-088	Hazelwood School District
096-089	Ferguson-Florissant R-II School District
096-090	Pattonville R-III School District
096-091	Rockwood R-VI School District
096-092	Kirkwood R-VII School District
096-093	Lindbergh R-VIII School District
096-094	Mehlville R-IX School District
096-095	Parkway C-2 School District
096-098	Affton 101 School District
096-099	Bayless School District
096-101	Brentwood School District
096-102	Clayton School District
096-103	Hancock Place School District
096-106	Ladue School District
096-107	Maplewood-Richmond Heights School District
096-110	Ritenour School District
096-113	Valley Park School District
096-114	Webster Groves School District
096-119	Special St. Louis County School District
100-063	Sikeston R-VI School District